

# CONGREGATION BETH TORAH

## CHAVURAH APPLICATION

Complete and return to:

Congregation Beth Torah, 720 W. Lookout Dr., Richardson, TX 75080-2136

Name(s): \_\_\_\_\_ Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Best time to call: \_\_\_\_\_

Email(s): \_\_\_\_\_

Age Range (Circle one):

20-24    25-34    35-44    45-54    55-64    over 65

Children: Name

Sex

Age

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CHAVURAH INTERESTS:

Number 1 to 5 with 1 most preferred

\_\_\_ Shabbat/Holiday Celebrations    \_\_\_ Jewish Study    \_\_\_ Singles

\_\_\_ People of mixed ages    \_\_\_ Social Activities    \_\_\_ People of similar age

\_\_\_ Other families with children    \_\_\_ Family-oriented Activities    \_\_\_ Empty Nesters

Tell us about the dietary habits of your family (vegetarian, kosher, etc.):

Do you have any specific skills you feel may be helpful in a *Chavurah* (i.e., leading study sessions, organizational ability, cooking strengths, singing ability, playing an instrument, camp experience, etc.)?

Briefly describe your Jewish background:

Have you previously participated in a *chavurah*?

Yes     No

List any friends (and contact information) who may want to participate in a *chavurah*: