



Edgware Bnei Akiva Family Friday Night! (Friday 4th December 2015)

Participants information

Parent/Guardian First Name _____

Parent/Guardian Surname _____

Address: _____

_____ Post Code: _____

Telephone: _____ Emergency Contact Number: _____

Email: _____

Form for Chanichim:

Chanich(a) First Name	Chanich(a) Surname	Date of Birth	School	School Year	Vegetarian or other Dietary Requirement?

Form for Adult's:

Adult First Name	Adult Surname	Vegetarian or other Dietary Requirement?

Message in the brochure:

Quarter page (£20) Half page (£40) Full page (£60) Gold page (£80)

Message: (Or attach business card or image)

Data Protection Act 1998

The information you provide on this form will be used by Bnei Akiva for the administration of its weekly programmes, summer and winter camps, and Israel schemes. By signing this form you acknowledge that this information may include sensitive personal data, and you agree to the processing of this information by Bnei Akiva for administrative purposes.



Payment information

Type	Cost	Quantity
Reception and younger	Free	
School Years 1-5		
Chanich/a has Mas Chaver	£8.50	
Chanich/a does not have Mas Chaver	£10	
School Years 6-10		
Chanich/a has Mas Chaver	£10	
Chanich/a does not have Mas Chaver	£12	
Adult	£15	
Total		

Mas Chaver (Bnei Akiva Membership for 5776)

Child is in school year 1-5 - £32

Child is in school year 6-13 - £53

Family Rate (two or more people) £89

OR my child's Mas Chaver number for

5775 (Sept 2015-August 2016) is: _____

GRAND TOTAL	
Family Friday Night Total	£
Brochure (If applicable)	£
Mas Chaver (If applicable)	£
TOTAL	£

Cheques should be made payable to 'Bnei Akiva'

If Bnei Akiva does not have up to date medical information for your child, please complete a medical form which can be downloaded from our website www.bauk.org/svivot and send it with this form.

Please return application forms, cheques and completed medical forms to:

EDGWARE FFN

1 Princes Close

Edgware, HA8 7QB

No later than Friday 27th November 2015

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