

TIKVAT ISRAEL HEBREW DEPARTMENT REGISTRATION FORM

Registration:

Please complete registration form and submit with payment (check made out to Tikvat Israel, memo: "Hebrew Classes") to: Hebrew Department, Tikvat Israel, 2715 Grove Ave., Richmond, VA 23220, or may be hand-delivered.

NOTE: Classes need a minimum of four students registered, otherwise class will be canceled.

Questions:

If you any questions, please contact the head of our Hebrew program at tikvathebrewclasses@gmail.com

Please print legibly!

Name: _____

Address: _____

Phone (h): _____ (w): _____ (cell)

Email: _____

Class level: _____

Amount paid: _____ (Check #: _____ / Cash) Comments:
