

Hokhmah: Wisdom
 Ziknah: Maturity
 Kadima: Looking Ahead

Programming for Adults 55 and Over



Please Print

Registration

Name:	
Address 1:	
Address 2:	
City:	
State:	
Zip Code:	
Home Phone:	
Cell Phone:	
Email Address:	
Dues Enclosed: (Please make check payable to CBS Hazak)	General Member (member of CBS): <input type="checkbox"/> \$15.00 Associate Member (Non-member of CBS) <input type="checkbox"/> \$20.00

Interests

Preferred Day/Time to Meet:	Programs I'd Like to See
1.	1.
2.	2.
3.	3.
	Additional: <input type="checkbox"/> Please Specify on Reverse
Talents/Interests	I would like to Volunteer for:
1.	Programming Committee <input type="checkbox"/>
2.	Arrangements/Setup <input type="checkbox"/>
3.	Telephone Committee <input type="checkbox"/>
4.	Other: <input type="checkbox"/> Please Specify on Reverse

Please make check payable to CBS Hazak and send to:

Hazak
 6047 Lymbar
 Houston, TX 77096