

# Beth El Religious School

*Permission Slip for:*

**Shir Atid – Children’s Choir  
Thursdays - 5:30-6:15**



Student's Name: \_\_\_\_\_

Grade: \_\_\_\_\_

\_\_\_\_ Please sign up my child up for Shir Atid, the Beth El Children’s Choir.

**Parent Contact Information:**

Father's Name \_\_\_\_\_

Email \_\_\_\_\_

Phone Number: (H) \_\_\_\_\_

(W) \_\_\_\_\_

(Cell) \_\_\_\_\_

Mother's Name \_\_\_\_\_

Email \_\_\_\_\_

Phone Number: (H) \_\_\_\_\_

(W) \_\_\_\_\_

(Cell) \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

**Please return this slip to the  
Religious School office by Sunday, September 12<sup>th</sup>.  
You may drop it off, mail, email, or FAX (301-907-8559) it in.**