

B'NEI MITZVAH BIOGRAPHY FORM

Please complete and return to Judith Gilson, jgilson@temple-beth-el.org no later than 3 months before your scheduled date.

2x3 digital photo
black and white or
color
email to
[jgilson@temple-
beth-el.org](mailto:jgilson@temple-beth-el.org)

NAME: _____

BAR/BAT-MITZVAH DATE: _____

SCHOOL NAME: _____

GRADE: _____

PARENTS'/GUARDIANS' NAME(S):

PARENT/GUARDIAN 1: _____

PARENT/GUARDIAN 2: _____

FAVORITE ACTIVITIES (SPORTS, HOBBIES, CLUBS, ETC.):

1. _____

2. _____

3. _____

4. _____

WHAT DOES BECOMING BAR/BAT-MITZVAH MEAN TO YOU?

(use back for more room, if needed):