

REGISTRATION FORM

8th Biennial Regional Retreat Camp Zeke (Lakewood, PA)

www.campzeke.org

JUNE 3-5, 2016

SIGN ME UP! (PLEASE TYPE OR PRINT)



NAME: _____ SYNAGOGUE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

EMAIL: _____ CELL: _____

EMERGENCY CONTACT (Name/Phone/Cell): _____

Name (to appear on Badge): _____ Please Circle: Kohen Levi Yisrael

Club Position: _____ Regional Position: _____

I am interested in: _____ Leading Services _____ Reading Torah _____ Leading Birkat

Special Dietary Restrictions: _____

Roommate Request (We will try to accommodate): _____

NNJR SUBSIDIZING YOUR COST!!

When sending in check with this registration form, **PLEASE PAY: \$100 first timer retreat/convention**
\$175 for returnees

Please make check payable to: **NNJR**

****ADD: \$95/person FOR A SINGLE ROOM****

SEND COMPLETED REGISTRATION FORM WITH CHECK TO:

NNJR Retreat c/o Rob Blitzer / 4 Berkshire Drive / East Windsor, NJ 08520

QUESTIONS? Contact Rob Blitzer: roblitzer@gmail.com | (773) 459-6931

DEADLINE: MAY 22, 2016!!!