

# Rabbi Joshua Hoffman

CLASS SIGN UP

**NAME:** \_\_\_\_\_

**PHONE:** \_\_\_\_/\_\_\_\_ **EMAIL ADDRESS:** \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_

**NAME:** \_\_\_\_\_

**PHONE NUMBER:** \_\_\_\_\_

**OCCUPATION:**

WHAT DO YOU HOPE TO LEARN FROM THIS CLASS?

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ANY PARTICULAR LEARNING NEEDS TO SHARE WITH RABBI HOFFMAN?

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ANY SUGGESTIONS FOR FUTURE LEARNING OPPORTUNITIES?

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