

## Temple Sinai College Connection Registration

Name \_\_\_\_\_

Birth date \_\_\_\_\_

Email Address \_\_\_\_\_

Parent Name(s) \_\_\_\_\_

\_\_\_\_\_

Parent Phone \_\_\_\_\_

College Attending \_\_\_\_\_

Anticipated Graduation \_\_\_\_\_

Student Address \_\_\_\_\_

\_\_\_\_\_

Student Phone Number \_\_\_\_\_