

Netzer Venture Shabbaton Details

The *Messy Mesibah* (meaning party in Hebrew) Netzer Venture Shabbaton (weekend) and its friendly environment is the perfect place for you to meet other young people from all over the north of the country. For new participants, it is a great introduction to RSY-Netzer; for old-timers it is a fantastic reunion.

- **Arrive:** Friday 16th March @ **6:00pm**
- **Depart:** Saturday 17th March @ **6:00pm**
- **Site Address:** Sinai Synagogue, Roman Avenue, Leeds, LS8 2AN
- **Transport:** Please arrange transport through your synagogue youth worker/contact.
- **Event & Emergency Contacts** - For information about the event and in case of an emergency during the event contact:
Ben Abram on 07917 207 460 & Guy Copitch on 07969 659 675 or email north@rsy-netzer.org.uk
- **Office Contact** - For application and payment information contact:
Alyson Joseph on 020 8349 5666 or email admin@rsy-netzer.org.uk
- **RSVP: Friday 2nd March 2012**
- On application you will be sent an email containing a welcome note, code of conduct and a kit list.
- There will be some separate programming for different age groups.
- Note for Menorah members: The Shabbaton finishes to allow enough time to travel from the Shabbaton to Menorah for Rabbi Brian and Dale Fox's Farewell Concert.



Netzer Venture Shabbaton Application Form



Please return this form with payment of £19 by 2nd March 2012 to Alyson Joseph, RSY-Netzer, The Sternberg Centre, 80 East End Road, Finchley, London, N3 2SY

APPLICANTS DETAILS

Surname: _____ Forenames: _____ Male / Female

E-mail: _____ Date of Birth: _____ School Year: _____

Home Address: _____

_____ Post Code: _____

Home Telephone: _____ Applicant's Mobile: _____

Synagogue: _____

Emergency Contact

This person must be available to be contacted during the event (16th-17th March 2012)

Name: _____ Relationship: _____

Mobile: _____ E-mail: _____

MEDICAL DETAILS

Please read the following notes carefully before completing this section of the form:

- The information you provide will be kept in the strictest of confidence.
- Please include all details that will allow us to support your child during the event.
- We work hard to accommodate all needs. Please call Alyson Joseph on 020 8349 5666 if you would like to speak to our professional Welfare Officer. This will be arranged in confidence.
- The withholding of medical information could lead to your child being withdrawn from the event.

1) Do you suffer from any recurring illnesses? Yes / No (delete as appropriate)

If you do please supply information: _____

2) Do you take any medication on a regular basis? Yes / No (delete as appropriate)

If you do please supply information: _____

3) Do you have any known allergies? Yes / No (delete as appropriate)

If you do please supply information: _____

4) Food on the event will be vegetarian. Are you on a special medical diet or do you have any other dietary requirements? Yes / No (delete as appropriate)

If you do please supply information : _____

5) Please supply any other comment on family health/background that you think will be useful for us to know.

