Please reserve ____ space(s) in:

___ **Yours, Mine & Ours,** Group # ___
$180/couple registration enclosed.

___ **A Taste of Judaism**, Class #___
No cost. Pre-registration requested.
□ Hingham □ Sudbury □ Brookline □ Boston
□ Westborough □ Westwood □ Lexington
□ Needham □ Cambridge □ Lowell □ Dedham

___ **Introduction to Judaism**, Class # ___
$275/individual or $360/couple registration enclosed.

___ **New Beginnings,** Group # ___
No cost. Pre-registration requested.

___ **Inside Interfaith Marriage**
$72/couple registration enclosed. $36/couple for URJ *Introduction to Judaism or YMO* graduates.

___ **In the Beginning: Nurturing Jewish Children,** Class #___
No cost. Pre-registration requested.

___ **Parenting with Jewish Values: Ikkarim**
Please contact Joyce Schwartz at 617-928-0012 or jschwartz@urj.org for registration information.

Scholarships and payment options are available.

Registrant 1:

Name _____ Age _____
Address _____
City _____State ____ Zip _____
Phone (Home) _____
(Work) _____ (Cell) _____
E-mail _____
Occupation _____
Religious Upbringing _____
Current Religion _____

How did you first hear about URJ Outreach Programs?

_____

Please specify other URJ programs that you have taken:
__ Yours, Mine & Ours
__ Taste of Judaism
__ Introduction to Judaism
__ New Beginnings
__ Inside Interfaith Marriage

Registrant 2:

Name _____ Age _____
Address _____
City _____State ____ Zip _____
Phone (Home) _____
(Work) _____ (Cell) _____
E-mail _____
Occupation _____
Religious Upbringing _____
Current Religion _____

If registering with a partner, please indicate:

Length of your relationship _____ Years
___ Dating ___ Married
___ Engaged ___ Other

Ages of Children _____None _____
Religion of Children _____ Undecided ____

Please call 617-928-0012 for information on scholarships and registration discounts for individuals and couples who have already paid for *Introduction to Judaism* or *Yours, Mine & Ours* classes.

Classes are filled on a first come/first serve basis. Please send your registration early. Confirmation and directions will be mailed to you before the class begins. Mail this registration form with your payment payable to URJ:

URJ Reform Jewish Outreach Boston
381 Elliot Street, Suite 155L
Newton, MA 02464

UNION FOR REFORM JUDAISM
SERVING REFORM CONGREGATIONS IN NORTH AMERICA

We welcome your questions.
Please contact Joyce Schwartz at
617-928-0012
jschwartz@urj.org

www.reformjewishoutreachboston.org

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