



Pirchei Agudas Yisroel of America

SEMI-ANNUAL HASMADAH PROGRAM

Sponsored by The Rabbi Joshua Silbermintz Memorial Fund

South Bend Hebrew Day School

Rabbi Goldwasser

1985 Johnson Rd.

South Bend IN 46614

The following must be completed legibly. Entry blanks must be completed to be considered.

First Name: _____

Last Name: _____

Phone Number: _____

Age: _____

Grade: _____

THE FOLLOWING IS A RECORD OF HOURS THAT I LEARNED EACH DAY DURING MY SUKKOS VACATION:

Friday October 7th	_____	יב' תשרי	Thursday October 13 th	_____	ב' חול המועד
Shabbos October 8 th	_____	יג' תשרי	Friday October 14 th	_____	ג' חול המועד
Sunday October 9 th	_____	ערב סוכות	Shabbos October 15 th	_____	שבת חול המועד
Monday October 10 th	_____	א' סוכות	Sunday October 16 th	_____	הושענא רבה
Tuesday October 11 th	_____	ב' סוכות	Monday October 17 th	_____	שמיני עצרת
Wednesday October 12 th	_____	א' חול המועד	Tuesday October 18 th	_____	שמחת תורה
Wednesday October 19 th _____ אסרו חג					

Total Hours Learned: _____

Parent's Signature: _____

ALL
PARTICIPANTS
WILL RECEIVE
A PRIZE!

Registration Forms must be received in our office by Monday Oct. 26th א' ראש חודש חשוון

Mail to: Pirchei Agudas Yisroel, 42 Broadway, New York, NY 10004 | Email: paihasmodo@agudah.org