

Baltimore/Ashkelon Matching Program

Please fill out this short form so that we can match you with the appropriate person or family.

Name: _____ Age: _____

Occupation: _____

Home Address: _____

Home Phone: _____ Email Address: _____

Spouse Name: _____ Spouse Age: _____

Spouse Occupation: _____

Do you have children? If yes, please provide name(s), age(s), and the school(s) they attend. _____

Have you ever been to Israel? _____ If so, have you been to Ashkelon? _____

What are your interests/hobbies (ie: traveling, camping, volunteering)? _____

Why do you want a pen-pal? _____

What do you hope to get out of your pen-pal relationship? _____



THE ASSOCIATED
Women's Department

