

**Membership Application**

I/We, \_\_\_\_\_, being of Jewish Faith, hereby make application to be elected / reinstated (circle one) as a regular member of the congregation in accordance with the by-laws of the congregation and promise to conform to all its established customs and regulations.

**Personal Information**

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Spouse's E-Mail: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Date of Marriage (if applicable): \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

**Family History**

	English Name	Hebrew Name	Date of Birth
Applicant	_____	_____	_____
Spouse	_____	_____	_____
Children	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

**Yahrtzeits**

English Name	Hebrew Name	Relationship	Date of Birth	Date of Death

Skills Relating to Synagogue Life	Have Skill	Want to Teach	Want to Learn
Hebrew Reading			
Torah Reading			
Leading Services			
Knowledge of Kashrut			
Jewish Cooking			
Teaching Children			
Building Maintenance / Handyman			
Adult Education			
Music			
Singing			
Dancing			
Historical Knowledge			
Drama			
Literature			

**Other special skills**

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**Programs or classes you would like to see offered at the synagogue**

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Committees you are interested in: (please check  all boxes that apply)

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|--|---|---|
| <input type="checkbox"/> Adult Education     | <input type="checkbox"/> Board of Education | <input type="checkbox"/> Building & Finance |
| <input type="checkbox"/> Newsletter          | <input type="checkbox"/> Cemetery           | <input type="checkbox"/> Chevra Kadisha     |
| <input type="checkbox"/> Community Relations | <input type="checkbox"/> Fund Raising       | <input type="checkbox"/> House              |
| <input type="checkbox"/> Library             | <input type="checkbox"/> Membership         | <input type="checkbox"/> Men's Club         |
| <input type="checkbox"/> Ritual              | <input type="checkbox"/> Sisterhood         | <input type="checkbox"/> Ways & Means       |
| <input type="checkbox"/> Youth               |   |   |

## **B'nai Israel Dues Schedule**

Minimum Dues for individuals or families are **\$103.00 per month** plus High Holiday assessments (approximately **\$125/adult**). Please make check payable to B'nai Israel Synagogue. If you would like to apply for an "alternative" dues request please check here  and explain below in the space provided. There are also special membership options with lower dues available. If any of the following apply to you, please check the appropriate box.

Associate Membership     Military Membership     Student Membership

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**You can mail in your application to the synagogue, or drop it by yourself to our secretary in the main office.**

### **Alternative Dues Request:**

*Please explain why you are seeking an alternative dues assessment. Be as specific as possible, and be sure to include the monthly amount that you are requesting to pay.*

To be completed by B'nai Israel staff:

**Member Name:** \_\_\_\_\_

## Membership Routing Sheet

Task	Name	Date	Notes
Application received			
Reviewed by Membership Chair			
Approved by Board			
Check deposited			
Welcome message			
Member data entered into Shul database			
Email & Phone added to contact lists			
Email to Newsletter Chair			