
MEMBERSHIP APPLICATION

Adult 1: (Please print)

Name: Mr./Mrs./Ms./Dr./Rabbi/Cantor _____

Home Address _____ City _____ ST _____ Zip _____

2nd Address (if applicable) _____

Home Phone _____ Cell Phone _____ Email _____

Date of Birth _____

Hebrew Name _____ Ben/Bat _____ Kohen/Levi/Yisrael _____

Occupation _____

Emergency Contact _____ Relationship _____ Phone # _____

Previous Synagogue Affiliations(s) _____
_____**Adult 2: (Please print)**

Name: Mr./Mrs./Ms./Dr./Rabbi/Cantor _____

Home Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____ Email _____

Date of Birth _____

Hebrew Name _____ Ben/Ba: _____ Kohen/Levi/Yisrael _____

Occupation _____

Emergency Contact _____ Relationship _____ Phone # _____

Previous Synagogue Affiliation(s) _____

How did you hear about Beth Ami Congregation? _____

Wedding Anniversary _____

(Please complete other side of application ...)



FAMILY YAHRZEITS (please add names on an additional sheet as needed):

Name of Departed Relationship Date of Death (English and/or Hebrew) Before/After Sundown

SKILLS AND INTERESTS:

We value your time and talents and encourage you to take an active part in synagogue life as a volunteer. Please check the areas that interest you and add your initials after each choice.

- | | |
|----------------------------|-----------------------|
| Membership Committee | Lead Services |
| Ritual Committee | Men's Club |
| Fundraising Committee | Choir |
| Programming Committee | Musical Instrument |
| Hospitality Committee | Office Volunteer |
| Caring Community Committee | Computer Skills |
| Women's Friendship Circle | Torah/Haftarah Reader |

Other _____

MARKETING WAIVER:

By signing below, I give permission for myself (and family) to be photographed and video recorded. Permission is granted for use of photos and likeness for promotional and/or archival purposes without compensation.

PLEASE READ AND SIGN:

I (we) hereby apply for admission as a member of Beth Ami Congregation and agree to abide by its rules and Constitution.

I (we) agree to pay all financial obligations in accordance with Beth Ami Congregation's By-Laws. I understand that my resignation does not exempt me from any financial obligations incurred by me (us) while a member.

Signed (Adult 1) _____ **Date** _____

Signed (Adult 2) _____ **Date** _____