

# Temple Beth Sholom Membership Application

Date \_\_\_\_\_

We are delighted that you have chosen to join Temple Beth Sholom. We hope that you will find membership an enriching experience and encourage you to explore the diverse opportunities for Jewish expression that Temple Beth Sholom offers. Please call upon our clergy, staff and lay leaders whenever we can assist you.

## Welcome!!

Adult I	Adult II (if applicable)
Full Name	Full Name
Home Address	Home Address <input type="checkbox"/> Same
City, State, Zip	City, State, Zip <input type="checkbox"/> Same
Home Phone	Home Phone <input type="checkbox"/> Same
Cell Phone	Cell Phone <input type="checkbox"/> Same
E-mail	E-mail <input type="checkbox"/> Same
Occupation/Profession (if applicable)	Occupation/Profession (if applicable)
Business/Employer Name (if applicable)	Business/Employer Name (if applicable)
Position/Title (if applicable)	Position/Title (if applicable)
Business Phone (if applicable)	Business Phone (if applicable)

Adult I	Adult II
Birth Month, Day, Year	Birth Month, Day, Year
Place of Birth	Place of Birth
Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Engaged <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced  Marriage Anniversary (if applicable)_____	Marital Status <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Partnered <input type="checkbox"/> Engaged <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced  Marriage Anniversary (if applicable)_____
Religious Affiliation <input type="checkbox"/> Jewish <input type="checkbox"/> Not Jewish	Religious Affiliation <input type="checkbox"/> Jewish <input type="checkbox"/> Not Jewish
Religious Background you were raised  <input type="checkbox"/> Reform <input type="checkbox"/> Conservative <input type="checkbox"/> Orthodox <input type="checkbox"/> Reconstructionist  <input type="checkbox"/> Jewish unaffiliated <input type="checkbox"/> Other _____	Religious Background you were raised  <input type="checkbox"/> Reform <input type="checkbox"/> Conservative <input type="checkbox"/> Orthodox <input type="checkbox"/> Reconstructionist  <input type="checkbox"/> Jewish unaffiliated <input type="checkbox"/> Other _____
Secular Education	Secular Education
Hobbies or skills:    Do you play an instrument? If so, what instrument?	Hobbies or skills:    Do you play an instrument? If so, what instrument?
Have you been a member of a synagogue in the past (not including congregation of your parents)? If so, name, location, and year joined & resigned.	Have you been a member of a synagogue in the past (not including congregation of your parents)? If so, name, location, and year joined & resigned.
Yahrzeit: Names, Date, Relationship, for memorialization at Shabbat Services          Would you like to purchase a memorial plaque to honor their memory?	

Every synagogue has the responsibility of providing for its members a well-rounded, diverse program of activities that touch every area of Jewish life. As our volunteers are the life & breathe of the congregation & the reason our congregation thrives, it is the responsibility of each member family to participate in at least one area of Temple life. Participation in Temple activities enriches the Temple membership experience for everyone. Even a small amount of time on a single project is welcomed and greatly appreciated. Please indicate below the area(s) to which you are able to commit your time. A list of committees is at the end of this application.

<b>Adult I</b>	<b>Adult II</b>
I would be interested in participating in the following Temple activities / committees (Mark as many as apply) <ul style="list-style-type: none"> <li><input type="checkbox"/> Adult Education</li> <li><input type="checkbox"/> Budget &amp; Finance</li> <li><input type="checkbox"/> College Outreach</li> <li><input type="checkbox"/> Choir/Music</li> <li><input type="checkbox"/> Building &amp; Grounds</li> <li><input type="checkbox"/> Membership</li> <li><input type="checkbox"/> Publicity</li> <li><input type="checkbox"/> Youth Committee</li> <li><input type="checkbox"/> Website/Communication/Newsletter</li> <li><input type="checkbox"/> Fine Arts/ Beautification/House &amp; Grounds</li> <li><input type="checkbox"/> Personnel Committee</li> </ul>	I would be interested in participating in the following Temple activities / committees (Mark as many as apply) <ul style="list-style-type: none"> <li><input type="checkbox"/> Adult Education</li> <li><input type="checkbox"/> Budget &amp; Finance</li> <li><input type="checkbox"/> College Outreach</li> <li><input type="checkbox"/> Choir/Music</li> <li><input type="checkbox"/> Building &amp; Grounds</li> <li><input type="checkbox"/> Membership</li> <li><input type="checkbox"/> Publicity</li> <li><input type="checkbox"/> Youth Committee</li> <li><input type="checkbox"/> Website/Communication/Newsletter</li> <li><input type="checkbox"/> Fine Arts/ Beautification/House &amp; Grounds</li> <li><input type="checkbox"/> Personnel Committee</li> </ul>

### **Children's Information**

List children in your household that are included in your family membership

	Child 1 <input type="checkbox"/> Male <input type="checkbox"/> Female	Child 2 <input type="checkbox"/> Male <input type="checkbox"/> Female	Child 3 <input type="checkbox"/> Male <input type="checkbox"/> Female	Child 4 <input type="checkbox"/> Male <input type="checkbox"/> Female
First and middle name				
Last name (if different)				
Birth date (month, day, year)				
Name of Current School				
Current Grade				
Address (if not living with you)				
Is this child being raised in the Jewish faith?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Will this child be attending Religious School at Temple Beth Sholom?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If previously attended Religious School, list Congregation and City				

Bar/Bat Mitzvah: Date, Congregation, City				
Confirmation: Date, Congregation, City				

Is there anything else we should know about you? \_\_\_\_\_

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## THE MITZVOT OF MEMBERSHIP

The Temple Commits:

- ✧ To provide religious services and observances that meet the spiritual, emotional and life cycle needs of each congregant.
- ✧ To provide a warm and caring atmosphere, extending hospitality.
- ✧ To provide an opportunity for meaningful deeds of *tikkun olam*, repair of our world and *gemilut chasadim*, acts of lovingkindness.
- ✧ To provide a continuum of Jewish education for our children and adults, including youth group programs which offer an opportunity to build Jewish community.
- ✧ To provide a financially sound and effectively managed organization.

The Member Commits:

- ✧ To participate in Temple Life, to do mitzvot, and support the members of your congregation through acts of lovingkindness.
- ✧ To grow through lifelong Jewish learning and to support and encourage children’s religious education.
- ✧ To observe Jewish customs and holidays, to attend services, and participate when honored.
- ✧ To meet your financial obligations to your Temple.

**Our relationship with you is a covenant. The only way for us to fulfill our commitment to you is for you to contribute to the success of our community.**

**The undersigned shall; (i) abide by the constitution, by-laws and policies of the Temple; (ii) notify the Temple in writing of any requested change of membership status prior to May 1 of the year for which such change is requested in order for such request to take effect for the fiscal year beginning on the following June 1; (iii) pay all dues, tuition and other obligations for each fiscal year in full unless the undersigned has resigned from membership pursuant to “(ii) above prior to commencement of the fiscal year; and (iv) pay the site fund amount over five (5) years, provided, however, that in any event, the full site fund amount shall be paid no later than (a) three (3) months**

**prior to the Bar/Bat Mitzvah of the undersigned's first child or (b) the undersigned's resignation from membership, whichever first occurs.**

Adult #1 Signature \_\_\_\_\_ Date \_\_\_\_\_

Adult #2 Signature \_\_\_\_\_ Date \_\_\_\_\_

(If applicant is a couple, both signatures are required.)

rev. June 2015