

# BETHESDA JEWISH CONGREGATION MEMBERSHIP APPLICATION

(Please print clearly and answer all questions. If a question does not apply, please indicate with n/a)

Family Name(s): \_\_\_\_\_

Home Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Fax \_\_\_\_\_ Primary Email Address \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ (Date of Marriage) \_\_\_\_\_ Widowed \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_

MALE HEAD OF HOUSEHOLD: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Date of Birth \_\_\_\_\_

Hebrew Name \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Company/ Business \_\_\_\_\_

Work Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Fax \_\_\_\_\_

Work E-Mail \_\_\_\_\_ Car/Cell Phone \_\_\_\_\_

FEMALE HEAD OF HOUSEHOLD: Last \_\_\_\_\_ First \_\_\_\_\_ MI \_\_\_\_\_ Date of Birth \_\_\_\_\_

Hebrew Name \_\_\_\_\_

Occupation \_\_\_\_\_ Name of Company/Business \_\_\_\_\_

Work Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Work Phone \_\_\_\_\_ Work Fax \_\_\_\_\_

Work E-mail \_\_\_\_\_ Car/Cell Phone \_\_\_\_\_

**Please list the names of all your children and indicate whether or not they live with you:**

NAME \_\_\_\_\_ HEBREW NAME \_\_\_\_\_

M/F \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GRADE \_\_\_\_\_ NAME OF SCHOOL \_\_\_\_\_ LIVE W/YOU \_\_\_\_\_

NAME \_\_\_\_\_ HEBREW NAME \_\_\_\_\_

M/F \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GRADE \_\_\_\_\_ NAME OF SCHOOL \_\_\_\_\_ LIVE W/YOU \_\_\_\_\_

NAME \_\_\_\_\_ HEBREW NAME \_\_\_\_\_

M/F \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GRADE \_\_\_\_\_ NAME OF SCHOOL \_\_\_\_\_ LIVE W/YOU \_\_\_\_\_

NAME \_\_\_\_\_ HEBREW NAME \_\_\_\_\_

M/F \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ GRADE \_\_\_\_\_ NAME OF SCHOOL \_\_\_\_\_ LIVE W/YOU \_\_\_\_\_

**PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION**

Please list the names of relatives whose Yahrzeits you observe and others for whom you say Kaddish

ENGLISH NAME \_\_\_\_\_ RELATIONSHIP TO WHICH MEMBER \_\_\_\_\_

DATE, MONTH, YEAR & APPROXIMATE TIME OF DEATH \_\_\_\_\_

ENGLISH NAME \_\_\_\_\_ RELATIONSHIP TO WHICH MEMBER \_\_\_\_\_

DATE, MONTH, YEAR & APPROXIMATE TIME OF DEATH \_\_\_\_\_

ENGLISH NAME \_\_\_\_\_ RELATIONSHIP TO WHICH MEMBER \_\_\_\_\_

DATE, MONTH, YEAR & APPROXIMATE TIME OF DEATH \_\_\_\_\_

ENGLISH NAME \_\_\_\_\_ RELATIONSHIP TO WHICH MEMBER \_\_\_\_\_

DATE, MONTH, YEAR & APPROXIMATE TIME OF DEATH \_\_\_\_\_

ENGLISH NAME \_\_\_\_\_ RELATIONSHIP TO WHICH MEMBER \_\_\_\_\_

DATE, MONTH, YEAR & APPROXIMATE TIME OF DEATH \_\_\_\_\_

**SYNAGOGUE ACTIVITIES AND COMMITTEES**

We depend upon our members for help and support. You will get the most out of your membership through active participation. Please check off those committees or programs that are of interest to you:

Adult Education \_\_\_\_\_ Finance \_\_\_\_\_ Social \_\_\_\_\_ Fundraising \_\_\_\_\_ Social Action \_\_\_\_\_ Communications \_\_\_\_\_ Legal/Personnel \_\_\_\_\_ Ritual \_\_\_\_\_  
Technology \_\_\_\_\_ Children's Events & Youth Activities \_\_\_\_\_ Membership \_\_\_\_\_ Religious School \_\_\_\_\_ Choir \_\_\_\_\_

How would you characterize your household; Multi Heritage \_\_\_\_\_ Empty Nester \_\_\_\_\_ Retiree \_\_\_\_\_ Young Couple \_\_\_\_\_

Special Needs accommodations required? \_\_\_\_\_

Please let us know if there are any particular programs or activities not listed above which are of interest to you:

\_\_\_\_\_  
\_\_\_\_\_

RITUAL SERVICE PARTICIPATION OPPORTUNITIES: Our synagogue offers many opportunities for participation in the rituals of the service. Please indicate below, with a number (1) if you have a knowledge of this area and would be willing to do this at the service, or with a number (2) if you do not have knowledge in this area but would be interested in learning.

TORAH \_\_\_\_\_ HAFTARAH \_\_\_\_\_ SHOFAR BLOWING \_\_\_\_\_ LEADING SERVICES \_\_\_\_\_

Please list any special skills, interests or talents you may have, which might be of assistance to the congregation (carpentry, musical talents, etc. \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Amount of any donation made during the current membership year \$ \_\_\_\_\_