Kesher Israel Membership Application

Name_____ Spouse's Name_____

Address _____

City_____ State/District_____ Zip_____

Home Phone ( ) _____

Cell ( ) _____ Spouse Cell ( ) _____

Email_____ Spouse Email_____

Do you want to be added to the email list? _____

Occupation_____ Spouse Occupation_____

Birthday_____ Spouse Birthday _____

Hebrew Name (Transliteration) _____

Spouse Hebrew Name (Transliteration) _____

Kohen___ Levi___ Israel___ N/A___

Please specify any items you wish to exclude from the membership directory:_____

Membership/Association Type

( ) Family
( ) Single Adult Over 65
( ) Single Adult 33-65
( ) Single Adult 25-32
( ) Single Adult under 25
( ) Full Time Student (Single Adult)
( ) Associate Membership*

*F*or those who do not live within walking distance of Kesher*

( ) Non-Member Friend of Kesher*

**For those ineligible for other types of membership. Receive mailings and member rates for events, no voting privileges. Please complete pages 1 and 2 only.*

Payment Information

Please circle a payment in the table below

Membership Type	Annual Payment	Monthly Payment	Quarterly Payment
Family*	$850 dues $50 maintenance	$75	$225
Single 65 and over	$400 dues $50 maintenance	$37.50	$112.50
Single 33-64	$600 dues $50 maintenance	$51.16	$162.50
Single 25-32	$400 dues $50 maintenance	$37.50	$112.50
Single <25	$180 dues $50 maintenance	$19.16	$57.50
Full-Time Student	$180 dues	$15	$45
Associate	$250 dues	$20.83	$62.50
Friend of Kesher (non-member)	$250 *(suggested)*	$20.83	$62.50

Dues are assessed on a fiscal year basis: July through June
**Families with children under the age of 14 will be assessed $100 for children's programming*

( ) I have included a check for my annual dues

( ) Please charge $_____ to my credit card

( ) Please charge $_____ to my credit card on a monthly basis

( ) Please charge $_____ to my credit card on a quarterly basis
Quarterly payments are processed in July, October, January, and April

Credit card type: ☐VISA ☐MasterCard ☐Discover

Credit card number: _____ Exp Date _____

Name on card: _____ 3 digit CVV _____

For Office Use Only

Board Approved _____

Dues Payment_____

SAP Issue_____

Family Information

Marital Status:
Single____
Married___ Date of Marriage_____
Widowed___
Divorced___

Children

Name	M/F	Date of Birth	Bar/Bat Mitzvah Date	Religious School	Grade

Parent Names (Please transliterate Hebrew into English)

Father

Member (Father's Name)	Spouse (Father's Name)
Hebrew Name _____	_____
English Name _____	_____

Mother

Member (Mother's Name)	Spouse (Mother's Name)
Hebrew Name _____	_____
English Name _____	_____

Committee Involvement

(Please indicate what committee(s) you are interested in becoming involved)

1. Administrative (IT support, general office support) _____
2. Adult Education _____
3. Building and Grounds (help maintain Kesher Israel physical facilities) _____
4. Chesed (community involvement)_____
5. Chevra Kadisha _____
6. Communications (help with all types of electronic communication)_____
7. Eruv checking and maintenance _____
8. Fundraising _____
9. Hospitality _____
10. Library _____
11. Mikvah _____
12. Programming (educational, children)_____
13. Social _____

Yahrzeit Information

This information will allow us to send out annual reminders of your Yahrzeit information. For additional entries please attach a second sheet. Please transliterate Hebrew to English.

English Name_____

Hebrew Name_____

Yahrzeit Date (Hebrew Calendar) _____

Yahrzeit Date (English Calendar) _____
If Hebrew date is unknown please include time of day.

Relationship to member_____

English Name_____

Hebrew Name_____

Yahrzeit Date (Hebrew Calendar) _____

Yahrzeit Date (English Calendar) _____
If Hebrew date is unkown please enter time of day:

Relationship to member _____

English Name_____

Hebrew Name_____

Yahrzeit Date (Hebrew Calendar) _____

Yahrzeit Date (English Calendar) _____
If Hebrew date is unkown please enter time of day:

Relationship to member _____

CONFIDENTIAL
Halakhic information

Please note:
This information will only be seen by the Rabbi and is used to verify membership eligibility

For the following questions, please note that family includes you (member), spouse, unmarried children, parents, and grandparents. In the event that the answer is yes, we ask you provide relevant details and attach appropriate documentation to the application. If you have any questions, please don't hesitate to contact the Rabbi (rabbi@kesher.org).

1. Have there been any conversions in your family? If yes, please specify relationship.
   _____
2. Have there been any adoptions in your family? If yes, please specify relationship.
   _____
3. Have there been any divorces in your family? If yes, please specify relationship.
   _____