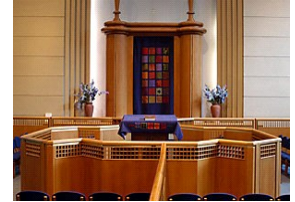


# Hebrew Institute of Riverdale - The Bayit



## ASSOCIATE MEMBERSHIP APPLICATION



Family/Riverdale Resident \$500/year.

Single/ Family residing outside Riverdale \$250/year

Please complete both sides of this application and attach a check made payable to Hebrew Institute of Riverdale.

**NOTE:** Associate membership in the HIR is open to full members in good standing of other Synagogues who wish to attend programs and services at the HIR on an occasional basis. A complete list of associate member benefits is listed on the reverse side of this application. **Associate members pay non-member rates for High Holiday seats.**

Name: \_\_\_\_\_ email: \_\_\_\_\_

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

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

Home Phone #: \_\_\_\_\_ Home Fax #: \_\_\_\_\_

Check this box to receive calls about upcoming events and shiva information.

### General Information:

Full Name: \_\_\_\_\_ Hebrew Name: \_\_\_\_\_

Father's Hebrew Name: \_\_\_\_\_ Mother's Hebrew Name: \_\_\_\_\_

Your Bar/Bat Mitzvah Parsha: \_\_\_\_\_ Date of Birth M/D/Y: \_\_\_\_\_

Tribe (Circle 1): Cohen    Levi    Yisrael    Work Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Check this box to regularly receive e-mail about our upcoming classes, events & shiva details.

### Spouse Information

Full Name: \_\_\_\_\_ Hebrew Name: \_\_\_\_\_

Father's Hebrew Name: \_\_\_\_\_ Mother's Hebrew Name: \_\_\_\_\_

Your Bar/Bat Mitzvah Parsha: \_\_\_\_\_ Date of Birth M/D/Y: \_\_\_\_\_

Tribe (Circle 1): Cohen    Levi    Yisrael    Work Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Wedding Anniversary (English Date) M/D/Y: \_\_\_\_\_

Check this box to regularly receive e-mail about our upcoming classes, events & shiva details.

### Children Information:

English Name	Hebrew Name	Date of Birth M/D/Y	School/Grade
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Office Use Only: Check #: \_\_\_\_\_ Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_



**Yahrzeits Information:**

**Your Relatives:**

Full English Name:	_____	Full Hebrew Name:	_____
Full Father's Hebrew Name:	_____	Relationship:	_____
Hebrew Date of Passing:	M/D/Y _____	English Date of Passing:	M/D/Y _____
		<input type="checkbox"/> Before Sunset	<input type="checkbox"/> After Sunset

Full English Name:	_____	Full Hebrew Name:	_____
Full Father's Hebrew Name:	_____	Relationship:	_____
Hebrew Date of Passing:	M/D/Y _____	English Date of Passing:	M/D/Y _____
		<input type="checkbox"/> Before Sunset	<input type="checkbox"/> After Sunset

**Spouse's Relatives:**

Full English Name:	_____	Full Hebrew Name:	_____
Full Father's Hebrew Name:	_____	Relationship:	_____
Hebrew Date of Passing:	M/D/Y _____	English Date of Passing:	M/D/Y _____
		<input type="checkbox"/> Before Sunset	<input type="checkbox"/> After Sunset

Full English Name:	_____	Full Hebrew Name:	_____
Full Father's Hebrew Name:	_____	Relationship:	_____
Hebrew Date of Passing:	M/D/Y _____	English Date of Passing:	M/D/Y _____
		<input type="checkbox"/> Before Sunset	<input type="checkbox"/> After Sunset

Check the following that you would like to be involved in:

- |   |  |
|---|--|
| <input type="checkbox"/> Youth Events               | <input type="checkbox"/> Meals for New Mothers           |
| <input type="checkbox"/> Hebrew School/JYEP         | <input type="checkbox"/> Visit the Homebound             |
| <input type="checkbox"/> Learning/Beginners Service | <input type="checkbox"/> Visit the Nursing Home/Hospital |
| <input type="checkbox"/> Hospitality Committee      | <input type="checkbox"/> Amcha/Israel Activism           |
| <input type="checkbox"/> Women's Tefillah           | <input type="checkbox"/> Young Couples Committee         |

Assoc. Membership entitles you to the following benefits:

- Member Rates for Shul Events
- Room Rental fees at Member Rates
- Inclusion in Member Only programs as full members
  - Purim Mishloach Manot
  - Membership Directory
- All member mailings and emails.
- Announcements in bulletin for lifecycle events.

Assoc. Membership does NOT provide:

- The right to vote in Shul Elections
- The right to purchase High Holiday seats at member prices.
- Associate members are not eligible to serve as Officers or Trustees of the HIR.