



MT. SINAI JEWISH CENTER

of Cong. Mt. Sinai Anshe Emeth & Emes Wozedek of
Washington Heights, Inc. and Cong. Beth Hillel-Beth Israel
135 Bennett Avenue · New York, NY 10040
212-568-1900 · 212-568-2307
www.mtsinaishul.com · office@mtsinaishul.com

APPLICATION FOR MEMBERSHIP

MEMBER TYPE

Family: Professional \$795 Student* \$345 *both partners must be students

Individual: Professional \$495 Student \$290

MEMBER 1

Full Name: _____

Hebrew Name: _____

Father's Hebrew Name: _____

Father's English Name: _____

Mother's Hebrew Name: _____

Mother's English Name: _____

Gender: Male Female

Tribe: Kohen Levi Yisrael

Convert: Yes No

Phone: _____

Email: _____

Date of Birth: _____

Occupation: _____

School (for students): _____

Expected graduation date: _____

MEMBER 2 (if applicable)

Full Name: _____

Hebrew Name: _____

Father's Hebrew Name: _____

Father's English Name: _____

Mother's Hebrew Name: _____

Mother's English Name: _____

Gender: Male Female

Tribe: Kohen Levi Yisrael

Convert: Yes No

Phone: _____

Email: _____

Date of Birth: _____

Occupation: _____

School (for students): _____

Expected graduation date: _____

MAILING ADDRESS

ADDRESS

APT#

CITY/STATE/ZIP

CHILDREN (if applicable)

CHILD 1: _____
English Name Hebrew Name Date of Birth

CHILD 2: _____
English Name Hebrew Name Date of Birth

CHILD 3: _____
English Name Hebrew Name Date of Birth

Yahrzeits (if applicable)

Full English Name: _____

Full English Name: _____

Full Hebrew Name: _____

Full Hebrew Name: _____

Father's Full Hebrew Name: _____

Father's Full Hebrew Name: _____

Hebrew Date of Passing: _____

Hebrew Date of Passing: _____

English Date of Passing: _____

English Date of Passing: _____

Relationship: _____

Relationship: _____

WEDDING ANNIVERSARY (if applicable): _____

SKILLS & EXPERIENCE

Are there particular skills or professional experiences that you can contribute to the synagogue or share with the synagogue community? _____

I AM INTERESTED IN LEARNING MORE ABOUT THE FOLLOWING COMMITTEES: (check all that apply)

- | | | | |
|-----------------------|--------------------------|----------------------------|--------------------------|
| Building Committee | <input type="checkbox"/> | Gabbaut | <input type="checkbox"/> |
| Chessed Committee | <input type="checkbox"/> | Hospitality Committee | <input type="checkbox"/> |
| Chevra Kadisha | <input type="checkbox"/> | Kiddush Committee | <input type="checkbox"/> |
| Education Committee | <input type="checkbox"/> | Membership Committee | <input type="checkbox"/> |
| Events Committee | <input type="checkbox"/> | Outreach Committee | <input type="checkbox"/> |
| Eruv Committee | <input type="checkbox"/> | Public Relations Committee | <input type="checkbox"/> |
| Family Life Committee | <input type="checkbox"/> | Ritual Committee | <input type="checkbox"/> |
| Fundraising Committee | <input type="checkbox"/> | Sisterhood | <input type="checkbox"/> |

Payments can be submitted online at www.mtsinaishul.com
or by check made payable to **Mt. Sinai Jewish Center**.