



MEMBER APPLICATION/FAMILY RECORD

(Please print)

ADULT #1

ADULT #2

1a. Full Name 1b. Hebrew Name 1c. Preferred Pronouns		
2. Cell Phone:		
3. E-mail address: (please print)		
4. Address, City, State & Zip & Home phone (if applicable)		
5. Date of Marriage:		
6. Date of Birth:		
7. Religious Background:	<input type="checkbox"/> Jewish <input type="checkbox"/> Non Jewish	<input type="checkbox"/> Jewish <input type="checkbox"/> Non Jewish
8. Do you read Hebrew?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Do you wish to participate in Services?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> English Portion <input type="checkbox"/> Hebrew Portion	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> English Portion <input type="checkbox"/> Hebrew Portion
10. YAHREIT RECORD Use this space to record additional Yahrzeits if needed.	Name: _____ Relationship: _____ Date English Calendar _____ <input type="checkbox"/> I prefer observing Hebrew calendar <input type="checkbox"/> I prefer observing English calendar Name: _____ Relationship: _____ Date English Calendar _____ <input type="checkbox"/> I prefer observing Hebrew calendar <input type="checkbox"/> I prefer observing English calendar Name: _____ Relationship: _____ Date English Calendar _____ <input type="checkbox"/> I prefer observing Hebrew calendar <input type="checkbox"/> I prefer observing English calendar	Name: _____ Relationship: _____ Date English Calendar _____ <input type="checkbox"/> I prefer observing Hebrew calendar <input type="checkbox"/> I prefer observing English calendar Name: _____ Relationship: _____ Date English Calendar _____ <input type="checkbox"/> I prefer observing Hebrew calendar <input type="checkbox"/> I prefer observing English calendar Name: _____ Relationship: _____ Date English Calendar _____ <input type="checkbox"/> I prefer observing Hebrew calendar <input type="checkbox"/> I prefer observing English calendar

**PLEASE FILL IN THE FOLLOWING INFORMATION AS IT APPLIES TO EACH OF YOUR CHILDREN
UNDER AGE 25 AND STILL LIVING AT HOME.**

	CHILD #1	CHILD #2	CHILD #3	CHILD 4
1. Name Nickname Hebrew Name				
2. Date of Birth				
3. Address: (if different from yours)				
4. Gender				
5. Public school grade entering as of September.				
6. Do any of your children have special needs? Please specify.				

Please list any other members of your household (example: grandparents) and their relationship to you.

How did you find out about Congregation Etz Chaim Monroe Township Jewish Center?

By affixing my (our) signature (s) below, I (we) agree to be bound by all the rules and regulations of the Congregation Etz Chaim Monroe Township Jewish Center set forth in the constitution and Bylaws, and to pay all Dues, Building Fund assessments, Religious School tuition, and other charges established by the Board of Trustees of the Congregation Etz Chaim Monroe Township Jewish Center. I (we) also agree that if for any reason I (we) choose to resign our membership, I (we) will do so in writing and agree to an exit interview. I (we) understand that I (we) may obtain a copy of the constitution by calling the Temple Office.

Signature(s) of Applicant(s) X _____

X _____

CONGREGATION ACTIVITIES IN WHICH YOU WOULD LIKE TO PARTICIPATE

INDICATE BY CHECK MARKS	ADULT #1	ADULT #2	INDICATE BY CHECK MARKS	ADULT #1	ADULT #2
Adult Education			Men's Club		
Art & Beautification			Music Group - Instruments		
Building & Grounds			Nominating Committee		
Caring Committee/ Visitation of Sick			Public Relations		
Choir Group			Religious School		
Education Committee			Ritual Committee		
Etz Chaim Bulletin "Roots"			Sisterhood		
Financial			Social Action		
Fund Raising			Special Events Committee		
Hebrew School Class Parent			Transportation		
Library			Usher Corp		
Membership Committee					

* Any special activity not listed that is important to you: _____

SPECIAL SKILLS, TALENTS AND HOBBIES YOU WOULD BE WILLING TO SHARE

INDICATE BY CHECK MARKS	ADULT #1	ADULT #2	INDICATE BY CHECK MARKS	ADULT #1	ADULT #2
Advertising			Legal		
Archives			Library		
Athletics (list)			Musical Instruments (list)		
Camping/Scouting			Photography		
Cooking			Reading from Torah		
Counseling			Sewing		
Crafts			Teaching-Hebrew		
Dancing/Drama			Woodwork		
List other languages spoken			List other interests		

Copy to Rabbi, President, Membership, Financial Secretary, Social Action & Office