

**YINBH BEVERLY HILLS SYNAGOGUE MEMBERSHIP AND HIGH HOLIDAY SEAT REQUEST FORM**  
*For the Year 5784 (2023-2024)*

	ADULT 1	ADULT 2
Title		
First Name		
Nickname		
Middle Name		
Maiden Name		
Last Name		
Date of Birth	<small>Would you like your Birthday listed in the Tefilla Notebook?  <input type="checkbox"/> Yes <input type="checkbox"/> No</small>	<small>Would you like your Birthday listed in the Tefilla Notebook?  <input type="checkbox"/> Yes <input type="checkbox"/> No</small>
Tribe	<input type="checkbox"/> Cohen <input type="checkbox"/> Levi <input type="checkbox"/> Israelite	<input type="checkbox"/> Cohen <input type="checkbox"/> Levi <input type="checkbox"/> Israelite
Hebrew Name		
Father's Hebrew Name		
Mother's Hebrew Name		
Cell Phone		
Home Phone		
Work Phone		
Email		
Occupation		
Anniversary	<small>Would you like your Anniversary listed in the Tefilla Notebook?  <input type="checkbox"/> Yes <input type="checkbox"/> No</small>	
Home Address:		
City:	State:	Zip:

**FOR NEW MEMBERS --- HISTORY & REFERENCES**

What Synagogues have you attended in the last 10 years? Please provide the names of Synagogues, time frame you were a member, and a reference at that Synagogue i.e. Rabbi or past President


**CHILDREN**

*If more children, please use a separate sheet*

	English Name	Hebrew Name	Marital Status	Birthday	School
Child 1 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 2 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 3 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 4 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 5 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 6 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 7 <input type="checkbox"/> Male <input type="checkbox"/> Female					
Child 8 <input type="checkbox"/> Male <input type="checkbox"/> Female					

## YAHRTZEITS

English Name	Relationship to Mourner	Hebrew Date of Death	English Date of Death	Hebrew Name <small>(ex: Yitzchak ben Avraham)</small>	Next Occurrence

## MEMBERSHIP CATEGORIES

MEMBERSHIP TYPE	AMOUNT	DETAILS
<input type="checkbox"/> Benefactor	\$15,000	Includes <b>2</b> Rosh Hashana & Yom Kippur Seats plus all unmarried children over 10 years old have free seats; Merits & Honors (Kibbudim) over High Holidays; 1 locker; 1 reserved Parking Spot; Priority Seat Selection, <i>Yizkor Book Fee &amp; Building Fund Fee Waived</i>
<input type="checkbox"/> Founder	\$10,000	Includes <b>2</b> Seats for Rosh Hashana & Yom Kippur plus all unmarried children over 10 have free seats; Merits & Honors (Kibbudim) over High Holidays; 1 locker; Priority Seat Selection <i>Yizkor Book Fee &amp; Building Fund Fee Waived</i>
<input type="checkbox"/> Gold	\$6,000	Includes <b>2</b> Seats for Rosh Hashana & Yom Kippur; Merits & Honors (Kibbudim) over High Holidays; Priority Seat Selection <i>Yizkor Book Fee &amp; Building Fund Fee Waived</i>
<input type="checkbox"/> Family Full Membership	\$3,600	Includes <b>2</b> Seats for Rosh Hashana & Yom Kippur
<input type="checkbox"/> Single Full Membership	\$1,800	Includes <b>1</b> seat for Rosh Hashana & Yom Kippur
<input type="checkbox"/> Young Families Full Membership	\$1,250	Includes <b>2</b> High Holiday Seats. <i>One adult must be 39 or under</i>
<input type="checkbox"/> Young Single Full Membership	\$750	Includes <b>1</b> High Holiday Seats. <i>Must be 39 or under</i>
<input type="checkbox"/> Family Associate Membership	\$1,500	<b>Does not</b> include Seats for Rosh Hashana & Yom Kippur
<input type="checkbox"/> Single Associate Membership	\$750	<b>Does not</b> include Seats for Rosh Hashana & Yom Kippur

## HIGH HOLIDAY SEAT RESERVATION FORM

EVEN IF YOUR MEMBERSHIP CATEGORY INCLUDES SEATS, IT IS STILL REQUIRED TO LET US KNOW IF YOU WILL BE USING THESE SEATS  
 Each Additional Child Seat is \$180 (Anyone under 21) Each Additional Adult Seat is \$500 (\$250 for RH/YK Only)

NAME	WHEN	SEAT TYPE	ADULT/CHILD	SEATING PREFERENCE
	RH 1 <input type="checkbox"/> RH 2 <input type="checkbox"/> YK <input type="checkbox"/>	Men <input type="checkbox"/> Women <input type="checkbox"/>	Adult <input type="checkbox"/> Child <input type="checkbox"/>	
	RH 1 <input type="checkbox"/> RH 2 <input type="checkbox"/> YK <input type="checkbox"/>	Men <input type="checkbox"/> Women <input type="checkbox"/>	Adult <input type="checkbox"/> Child <input type="checkbox"/>	
	RH 1 <input type="checkbox"/> RH 2 <input type="checkbox"/> YK <input type="checkbox"/>	Men <input type="checkbox"/> Women <input type="checkbox"/>	Adult <input type="checkbox"/> Child <input type="checkbox"/>	
	RH 1 <input type="checkbox"/> RH 2 <input type="checkbox"/> YK <input type="checkbox"/>	Men <input type="checkbox"/> Women <input type="checkbox"/>	Adult <input type="checkbox"/> Child <input type="checkbox"/>	
	RH 1 <input type="checkbox"/> RH 2 <input type="checkbox"/> YK <input type="checkbox"/>	Men <input type="checkbox"/> Women <input type="checkbox"/>	Adult <input type="checkbox"/> Child <input type="checkbox"/>	
	RH 1 <input type="checkbox"/> RH 2 <input type="checkbox"/> YK <input type="checkbox"/>	Men <input type="checkbox"/> Women <input type="checkbox"/>	Adult <input type="checkbox"/> Child <input type="checkbox"/>	

## PAYMENT

Membership Dues (See Categories Above)	\$ _____
Each Additional Adult Seat ( <i>outside of what is included in your membership category</i> ) # _____ Additional Adults x \$500	\$ _____
Each Additional Child Seat (anyone under age 21) # _____ Additional Children x \$180	\$ _____
<b>PLEASE ADD IN THE FOLLOWING MANDATORY COMMUNITY FEES:</b>	
Annual Eruv Contribution	\$55.00
National Council of Young Israel and OU Membership Dues	\$50.00
YINBH Building Fund ( <i>Waived for Gold, Founder, and Benefactor</i> )	\$300.00
Sisterhood Contribution	\$50.00
Security Fund – Family Membership \$360 OR Young Professional/Single membership \$180	\$360 or \$180
<b>TOTAL ENCLOSED</b>	<b>\$ _____</b>