

Friends and relatives at CBOI

Please list your skills and interests:

Please state activities and positions held in previous congregations:

Any other information you'd like CBOI to know?

How did you come to know of CBOI?

What made you decide to join?

Please circle one: I/We DO DO NOT give permission for BOI to record and use photos or video in publicity, our newsletter and website.

I/We'd like to participate in: (circle all)

Men's Club Sisterhood Parent Teacher Organization Community Garden Leading Services
Adult Education Membership Fundraising Cemetery Committee Leadership

I/We hereby apply for membership in Congregation Brothers of Israel. If accepted, I/we agree to accept the responsibilities and privileges of membership and to pay the total of all financial obligations, as well as abide by the Constitution and by-laws of the congregation.

Signature: _____ Date: _____

Signature: _____ Date: _____