

# CONGREGATION BETH EL MEMBERSHIP FORM

(PLEASE PRINT OR TYPE AND COMPLETE ALL INFORMATION REQUESTED BELOW)



Date \_\_\_\_\_

Family Name \_\_\_\_\_ Husband's First Name \_\_\_\_\_ Initial \_\_\_\_\_

Wife's First Name \_\_\_\_\_ Initial \_\_\_\_\_ Maiden Name \_\_\_\_\_

Home Address (including zip code) \_\_\_\_\_

Home Phone \_\_\_\_\_ Business Phone (His) \_\_\_\_\_ (Hers) \_\_\_\_\_

E-mail Address (His) \_\_\_\_\_ (Hers) \_\_\_\_\_

Marital Status \_\_\_ Married \_\_\_ Single \_\_\_ Widow/er \_\_\_ Divorced Date/Place of Marriage \_\_\_\_\_

## Male Member

Place/Date of Birth \_\_\_\_\_

Hebrew Name(if known) \_\_\_\_\_

Father's Hebrew Name(if known) \_\_\_\_\_

Mothers's Hebrew Name(if known) \_\_\_\_\_

Occupation \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

\_\_\_ Bar Mitzvah \_\_\_ Confirmation

\_\_\_ Youth Group

\_\_\_ Years of Religious School

\_\_\_ Read Hebrew \_\_\_ Speak Hebrew

\_\_\_ Chant Torah or Haftorah

## Female Member

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\_\_\_ Bat Mitzvah \_\_\_ Confirmation

\_\_\_ Youth Group

\_\_\_ Years of Religious School

\_\_\_ Read Hebrew \_\_\_ Speak Hebrew

\_\_\_ Chant Torah or Haftorah

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## CHILDREN

(If Children are married, list husband or wife and children)

English Name Hebrew Name Date of Birth If not home, give current address

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## Y A H R Z E I T S

English Name

Hebrew Name

Relationship

Date of Death

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Do you own cemetery lot(s)? \_\_\_\_\_ If yes, where? \_\_\_\_\_

I would like to participate on the following committees:

\_\_\_\_ Sunday School

\_\_\_\_ Membership

\_\_\_\_ Ritual

\_\_\_\_ Social

\_\_\_\_ Music

\_\_\_\_ House

\_\_\_\_ Adult Education

I would like to be invited to:

\_\_\_\_ Brotherhood Meetings

\_\_\_\_ Sisterhood Meetings

\_\_\_\_ Youth Group Meetings

\_\_\_\_ Adult Education Meetings

## DUES

Congregational membership is a mitzvah in that you are supporting our local institution of Jewish life. Congregation Beth El asks its members to pay annual dues to support the operations of the Temple, the rabbinic and support staff, and membership in the Union for Reform Judaism. *The calculations for dues are based on an honor system wherein the congregant pays a minimum of 1½ to 2 percent of your gross annual household income or a minimum of 1 percent of your assessed property tax value.* Households unable to afford these minimums may note this below. Please contact our treasurer Tracy Lisner should you have any questions through the Temple office at 903-581-3764.

Please list your suggested contribution. \_\_\_\_\_. You will be contacted by a member of the Board if there are any questions.

# WELCOME!

Please Return This Form By Mail Or Fax To:

**Congregation Beth El**  
**1010 Charleston Dr.**  
**Tyler, TX 75703**  
**903-581-3987 (FAX)**