

Shirat HaNefesh PO Box 8681 Silver Spring, MD 20907-8681 240-292-9450 info@ShiratHaNefesh.org www.ShiratHaNefesh.org

## **Membership Data Form**

Welcome to Shirat HaNefesh! We are delighted to have you as a member. The information you provide is confidential and for our records only. When we publish our annual directory, we will confirm with you which pieces of information should be listed under your name.

ADULT A NAME:		
HEBREW NAME:		
BEST PHONE: Cell	EMAIL ADDRESS:	
ADULT B NAME:		
HEBREW NAME:		
BEST PHONE:  Home Work Cell	EMAIL ADDRESS:	
STREET ADDRESS:		
CITY:	STATE:	ZIP:
	ADULT A	ADULT B
Birth Date	mm / dd / yyyy	mm / dd / yyyy
Anniversary Date		ld / yyyy

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Name		Birth Date	Relat	ionship	
Iinor Children					
Child's Full Name		Child's Hebi	rew Name	Birth Date	Grade
— Check here ii yo	u plan to sc	hedule a Bar	Bat Mitzvah	within the next	four years.
ahrzeits	u plan to sc		Date of Death (Secular)		eath Prefe y) Hebrew
ahrzeits			Date of Death	Date of De	eath Prefe
ahrzeits			Date of Death	Date of De	eath Prefe y) Hebrew
ahrzeits			Date of Death	Date of De	eath Prefe y) Hebrew
ahrzeits			Date of Death	Date of De	eath Prefe y) Hebrew
ahrzeits			Date of Death	Date of De	eath Prefe y) Hebrew
ahrzeits			Date of Death	Date of De	eath Prefe y) Hebrew
ahrzeits	Relatio	onship	Date of Death (Secular)	Date of De (Hebrew	eath Prefe Hebrew secular
** We will send yo deceased loved ones i	Relatio	inders of Yahrtz	Date of Death (Secular)	Date of De (Hebrew	eath Prefe Hebrew secular

Spe	ecial talents	s, skills, interests or g	goals you would lik	e to share:
	w did you ł	near about us?		
		iation when growingConservative	• `	,
Una	ffiliated	Jew by Choice	Not Jewish	
<u>M</u>	arketing U	se of Photographs		
		we like to take photos of our use your photo? Please note		e on our website and occasionally photos used online.
	I give permiss	ion for Shirat HaNefesh to use	photos of my family on the	e website, in an email, or in print.
	I give permiss children or gra	ion for Shirat HaNefesh to use andchildren.	photos of the adults in my	family but not our minor
	I do not give p	permission for Shirat HaNefesl	n to use any photographs of	my family

## **MEMBER DUES**

I/WE HEREBY MAKE APPLICATION FOR MEMBERSHIP in Shirat HaNefesh and hope to become as involved as fully as possible in the programs of the congregation.

I/We recognize that Shirat HaNefesh, as a non-profit institution, must be supported fully by its members, and I/we pledge to undertake a reasonable share of fiscal responsibility.

Full Membership, which includes High Holy Day tickets for the immediate family	Standard Dues Amount
Household with one adult	\$1,000
Household with two or more adults	\$2,000
Associate Membership Open to those who are also members of another congregation. Does not include High Holy Day tickets.  What is your Primary Membership Congregation?	\$400

## **Dues Relief**

No one will be denied membership because of financial circumstances. If you would like to avail yourself of dues relief, please contact our Membership Coordinator at membership@shirathanefesh.org

## Voluntary Dues Increase

Shirat HaNefesh is a young and growing community and as such, we tried to keep our dues competitively low and uncomplicated. Just as there are those who can't pay the full amount, there are those who will be joining Shirat HaNefesh who are able to pay more than our base membership amount. Please consider whether you are in a position to increase your dues to help grow this wonderful community by becoming a Shirat HaNefesh Supporter:

I/We pledge annual dues of \$	•
I/We wish to pay our dues in the following mann	ner:
☐ Annual payment ☐ Semi-annual payments ☐ Q	quarterly payments
Payments can be made by sending a check to our PO Box (see a we ask that you please consider adding 3% to cover the expense	
SIGNATURES:	
Adult A:	Date:
Adult B:	Date:

Send data form to: Shirat HaNefesh, PO Box 8681, Silver Spring, MD 20907 or to info@ShiratHaNefesh.org