



CONGREGATION ADATH JESHURUN MEMBERSHIP APPLICATION

2401 Woodbourne Avenue ❖ Louisville, KY 40205

Phone: 502.458.5359 ❖ Fax: 502.451.5634

Email: info@adathjeshurun.com ❖ Web: www.adathjeshurun.com

We are delighted to welcome you as a member of Congregation Adath Jeshurun – A synagogue committed to the principles and values of Conservative Judaism. Completing this application will help us get to know you and your family, so that we can best engage you into the Adath Jeshurun community. This completed application may be returned to the synagogue office in person, by mail, fax or email.

ADULT #1	ADULT #2
Title: (optional)	Title: (optional)
First Name:	First Name:
Middle / Maiden Name:	Middle / Maiden Name:
Last Name:	Last Name:
Date of Birth:	Date of Birth:
Email address:	Email address:
Contact Phone Number:	Contact Phone Number:

- 2-Adult Household:
 Married--Anniversary Date: _____
 Partnered
 1-Adult Household:
 Single
 Separated
 Divorced
 Widowed

HOME INFORMATION

Street Address: _____
 City: _____ State: _____ Zip Code: _____ Home Phone: _____

BUSINESS INFORMATION – ADULT #1	BUSINESS INFORMATION – ADULT #2
Position:	Position:
Employer:	Employer:
Phone:	Phone:

CHILDREN:	CHILD #1	CHILD #2	CHILD #3	CHILD #4
First name:				
Middle name:				
Last name:				
Hebrew name:				
Gender:	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F
Date of birth:				
Was child adopted?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If child was adopted, list date of conversion:	Date: _____	Date: _____	Date: _____	Date: _____
Grade in School:				

If application date is after June 1st, indicate grade the child will enter in September.

JEWISH GEOGRAPHY

- Do you have any relatives who are members of Congregation Adath Jeshurun? Please tell us their names and how you are related:

- Are you, or have you been a member of another local synagogue? If so, please list name of synagogue:

Yahrzeit Observance

Please list the names and other requested information for those you wish remembered:

	Adult #1 remembering:	Adult #1 remembering:	Adult #2 remembering:	Adult #2 remembering:
First name of departed:				
Last name of departed:				
Hebrew name:				
Relationship:				
Civil date of death:				
Time of death:				

*For names of additional family members, please attach a separate sheet.

Making a Connection

Which congregational activities or volunteer opportunities might interest you or other members of your family?

- | | | |
|--|--|--|
| <input type="checkbox"/> Adult Bar/Bat Mitzvah | <input type="checkbox"/> Choir | <input type="checkbox"/> Preschool |
| <input type="checkbox"/> Adult education | <input type="checkbox"/> Family Activities | <input type="checkbox"/> Social Activities |
| <input type="checkbox"/> Baking | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Senior Activities |
| <input type="checkbox"/> Building and grounds | <input type="checkbox"/> Minyan | <input type="checkbox"/> Other |

List any special skills or talents you would like to share with the synagogue: _____

Check here to give your permission for photos of you and your family to be used in Adath Jeshurun printed and digital publications and social media.

Please Share Your Religious Background

ADULT #1:

In what religious tradition were you raised? Conservative Reform Orthodox Secular Non-Jewish None

Full Hebrew name (including parents): _____

Religion of Father: _____ Religion of Mother: _____

If you were not raised Jewish, did you Convert to Judaism? — If so, list conversion date: _____

Did your Jewish education include a Bar/Bat Mitzvah? If so, list date: _____

Can you read Hebrew? Yes No Can you read Torah? Yes No

Can you chant a Haftarah? Yes No Can you lead a Daily Minyan? Yes No

ADULT #2:

In what religious tradition were you raised? Conservative Reform Orthodox Secular Non-Jewish None

Full Hebrew name (including parents): _____

Religion of Father: _____ Religion of Mother: _____

If you were not raised Jewish, did you Convert to Judaism? — If so, list conversion date: _____

Did your Jewish education include a Bar/Bat Mitzvah? If so, list date: _____

Can you read Hebrew? Yes No Can you read Torah? Yes No

Can you chant a Haftarah? Yes No Can you lead a Daily Minyan? Yes No

Your membership contribution is tzedakah — We are so grateful for your support! Adath Jeshurun works on a membership model in which membership contributions can sustain our synagogue without frequent fundraisers. Options are listed below.

A. STANDARD MEMBERSHIP SUPPORT JULY 2021 – JUNE 2022. These rates reflect the minimum household contribution needed for membership dollars to sustain Adath Jeshurun. All children ages 25 and below have membership privileges as part of their family affiliation. Beginning at age 26, children are invited to establish a membership in their own name, which is complimentary through age 29. If joining mid-year, rates are pro-rated.

AGE of OLDEST adult in household	2-ADULT HOUSEHOLD or ANY HOUSEHOLD WITH CHILDREN	1-ADULT HOUSEHOLD WITHOUT CHILDREN
18 - 29	Complimentary Membership	Complimentary Membership
30 - 35	\$1,436	\$ 718
36 & Over	\$2,244	\$1,122

B. 21st CENTURY PLAQUE SUPPORT: This membership category supports the synagogue at levels over and above the standard membership commitment, to supplement those households which are currently unable to support at the full level. Names of these donors are proudly displayed on a decorative plaque in the synagogue lobby. The four levels of 21st Century Plaque support are listed below:

LEVEL	SUPPORT
SUPPORTER	\$ 500 additional annual support
GUARDIAN	\$1,500 additional annual support
BUILDER	\$2,500 additional annual support
BENEFACTOR	\$3,500 additional annual support

C. ASSOCIATE MEMBERSHIP: Households which have a full membership at another synagogue are eligible for an Associate Membership at Adath Jeshurun. Annual Associate Membership support for any household is \$628 + a contribution to the Endowment Fund of \$60 per Jewish adult.

D. SUPPLEMENTAL ANNUAL MEMBERSHIP SUPPORT: Necessary to sustain the synagogue and to support education. These rates apply to Standard Membership support and 21st Century Plaque support, and are an additional amount added to these membership rates.

CATEGORY	SUPPORT
CAPITAL FUND	\$ 500 payable at \$100 per year over a five-year period.
ENDOWMENT FUND	\$ 60 per year per Jewish adult
SEMINARY	\$ 20 per year (Funds are sent to the Jewish Theological Seminary.)

E. SUPPORT REDUCTIONS: AJ understands that not everybody is able to afford standard membership support rates. If these amounts present a financial hardship, please request a confidential RATE ADJUSTMENT APPLICATION in the section below. Nobody is ever turned away due to inability to pay full membership support. Please reach out to us if this is an issue. Everyone is welcome and wanted at Congregation Adath Jeshurun!

PLEASE SELECT ONE MEMBERSHIP PACKAGE BELOW FOR WHICH YOU ARE APPLYING:

- A. STANDARD MEMBERSHIP SUPPORT**
- B. 21ST CENTURY PLAQUE SUPPORT:** Check support level: Supporter Guardian Builder Benefactor
- C. ASSOCIATE MEMBERSHIP:** List name of synagogue where you have a full membership: _____
- D. SUPPLEMENTAL ANNUAL MEMBERSHIP SUPPORT (Applicable to Packages A and B above.)**
- E. SUPPORT REDUCTION:** Request a confidential Rate Adjustment application to this email address: _____

I hereby apply for membership in Congregation Adath Jeshurun. I am aware of the financial obligations of membership, for which I will be billed by the synagogue, and I agree to have my synagogue account paid in full within 90 days of the billing date. I understand that membership privileges are automatically renewed each year, and will continue until Adath Jeshurun is notified in writing of a change.

Signature _____ Name printed _____ Date _____