



YOUNG ISRAEL OF MARGATE CITY

609-823-3630

APPLICATION FOR MEMBERSHIP

I. FAMILY PROFILE

Family Name: _____ Home Phone #: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Summer Address: _____

City: _____ State: _____ Zip Code: _____

II. HUSBAND CONTACT INFORMATION

First Name: _____ Hebrew Name: _____

Cell #: _____ Date of Birth: _____

E-mail Address: _____

III. WIFE CONTACT INFORMATION

First Name: _____ Hebrew Name: _____

Cell #: _____ Date of Birth: _____

E-mail Address: _____

IV. YAHRZEIT INFORMATION

Hebrew Name	English Name	Hebrew Date	English Date	Relationship

V. MEMBERSHIP INFORMATION

Please Circle One:

Annual Family: \$1000. Annual Single: \$600. Summer Family: \$600. Summer Single: \$300.

VI. PAYMENT INFORMATION

Checks payable to: Young Israel of Margate
8401 Ventnor Avenue
Margate City, NJ 08402