



www.caa-newburyport.com

Membership Application

Date: ____/____/____

Welcome to our community!

- Engage with our extensive programming.
- Introduce your children to our innovative youth and Hebrew School programming.
- Experience Adult Ed classes, Sunday field trips, film series, book club, holiday services, social events and more!
- Be inspired by our services, prayer, and song.

You will become part of the growing number of families and individuals who have made a commitment to support **Congregation Ahavas Achim** as it continues its more than 125-year tradition of relevance, inclusion and service to G-d, the Jewish people, and our community.

FIRST ADULT

Name: _____

Street: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Date of Birth: ____/____/____

Hebrew Name

(If applicable): _____

SECOND ADULT

Name: _____

Street: _____

City: _____ State: _____ ZIP: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Date of Birth: ____/____/____

Hebrew Name

(If applicable): _____

Children First and Last Names

Date of Birth

____/____/____
____/____/____
____/____/____
____/____/____

Hebrew Name (if applicable)

☐ Check here if you would like to add any yahrzeit observances to the CAA database, the Rabbi will be in touch.

Please check the areas in which you may have interest or skills in sharing:

<input type="checkbox"/> Ritual	<input type="checkbox"/> Chesed: Acts of loving-kindness	<input type="checkbox"/> Education
<input type="checkbox"/> Holiday Celebrations	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Communications, Web Presence, Technology
<input type="checkbox"/> Membership	<input type="checkbox"/> House: Care and maintenance of our historic building	<input type="checkbox"/> Social: Teens, Men's Club, Women's Group, etc.
<input type="checkbox"/> Finance / Administration	<input type="checkbox"/> Other:	<input type="checkbox"/> Other:

Membership Category

Category	Description	Dues
<input type="checkbox"/> Family*	Two adults with or without children or One adult with children	First year: \$1200 Second year: \$1360 Thereafter: \$1600
<input type="checkbox"/> Single	One adult without children	First year: \$ 750 Second year: \$ 850 Thereafter: \$1000
<input type="checkbox"/> Second Shul	Holds membership in at least one other synagogue.	\$ 800
Membership includes High Holiday seats (Nonmember seats \$180 single, \$324 family) * Family Membership is required for Hebrew School enrollment. Tuition varies by age.		

The membership year begins July 1 and ends June 30. Dues may be paid with application or in two or more installments spread over the membership year with approval of the Treasurer. If more than one member email address is provided above, please indicate the preferred email address for billing.

Please send this completed membership application and a check for full dues payment or first installment to:

Congregation Ahavas Achim
53 ½ Washington St.
Newburyport, MA 01950

Financial limitations are not an impediment to membership at Congregation Ahavas Achim. Please contact the Treasurer at treasurer@caa-newburyport.org for a confidential discussion about a special financial arrangement.

If you need more information or have questions about congregation membership, please email admin@caa-newburyport.org or call (978) 255-3144. *Bruchim Haba'im--Welcome!*