



Beth Tikvah Synagogue

P.O. Box 1042 45 Oak St. / Westborough, MA / 01581 /
508-616-9037/ www.bethtikvahsynagogue.org

MEMBERSHIP FORM (please print)

New Renewal

Thank you for providing the requested information below. This will help us get to know you better!

Primary Member *			Secondary Member		
Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____			Title: <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/> Dr. <input type="checkbox"/> Other _____		
Last Name	First Name	MI	Last Name	First Name	MI
Please check one: <input type="checkbox"/> I am Jewish by birth <input type="checkbox"/> I am Jewish by Choice <input type="checkbox"/> I am Not Jewish			Please check one: <input type="checkbox"/> I am Jewish by birth <input type="checkbox"/> I am Jewish by Choice <input type="checkbox"/> I am Not Jewish		
Address			Address		
City	State	Zip	City	State	Zip
Home Phone	Email Address		Home Phone	Email Address	
Cell Phone	Birthdate		Cell Phone	Birthdate	
Marital Status	Wedding Date		Marital Status	Wedding Date	
My Hebrew Name	Select One: <input type="checkbox"/> Cohen <input type="checkbox"/> Levi <input type="checkbox"/> Israelite		My Hebrew Name	Select One: <input type="checkbox"/> Cohen <input type="checkbox"/> Levi <input type="checkbox"/> Israelite	
Mother's English and Hebrew Name			Mother's English and Hebrew Name		
Father's English and Hebrew Name			Father's English and Hebrew Name		
Job Title / Occupation			Job Title / Occupation		
Business Phone and Email address			Business Phone and Email address		

CHILDREN LIVING AT HOME OR ATTENDING COLLEGE AGE 25 OR UNDER

Last Name	First Name	MI	Last Name	First Name	MI
Hebrew Name			Hebrew Name		
Birthdate	Grade		Birthdate	Grade	
Do you intend to enroll your child in Beth Tikvah's Religious School? <input type="checkbox"/> YES <input type="checkbox"/> NO			Do you intend to enroll your child in Beth Tikvah's Religious School? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Last Name	First Name	MI	Last Name	First Name	MI
Hebrew Name			Hebrew Name		
Birthdate	Grade		Birthdate	Grade	
Do you intend to enroll your child in Beth Tikvah's Religious School? <input type="checkbox"/> YES <input type="checkbox"/> NO			Do you intend to enroll your child in Beth Tikvah's Religious School? <input type="checkbox"/> YES <input type="checkbox"/> NO		

BUILDING FUND OPTION - NEW MEMBERS (please check one)

I will pay \$1,500 building fund fee this year I will pay \$2,000 building fund fee over time I have previously paid a building fund fee

*ON-LINE ACCOUNT ACCESS

Primary member has full access to the on-line account including the ability to make payments and manage members on their account.