Temple Beth Hillel - Beth El Wynnewood, PA

Membership Information Form

The information in this form is used to connect you with the TBH-BE community. We look forward to you joining us!

MEMBER #2

MEMBER #1

Address (if not the same)

Name:					Name:			
Address:					Address:			
City:	Sta	te:			City:		State:	
Gender:	Date of birth:			Gender:	Gender: Date of birth:			
Phone (H)	Phone (C)			Phone (H)	Phone (C)			
Email:		. ,			Email:		,	
Occupation:					Occupation:			
Company:					Company:			
Single M	larried Dat	e:			Single	Married	Date:	
Separated	Divorced	l Wid	owed		Separated		orced	Widowed
Hebrew Name:					Hebrew Name:			
Child of:					Child of:			
	_evi	Israelite			Kohen	Levi	Isra	elite
Previous Synagogu					Previous Synag	_		
City:		Year(s)			City:	oguo.	Vos	ar(s)
-	51.41.6				ľ	. 5		,
Are you Jewish by	Birth?	Yes	No		Are you Jewish	by Birth?	Yes	No
Are you Jewish by	Choice?	Yes	No		Are you Jewish	by Choice	? Yes	No
If so, provide date of conversion.				If so, provide date of conversion.				
CHILDREN								
	Child #1			Chile	d #2		Child #3	
First/Last Name								
Gender								
Date of Birth								
Cell Phone								
Email								
School (if applicable)								
Grade								

Company (if applicable) Are your children born to a Jewish mother? Yes If no, have any of your children been converted to Judaism? If so, please provide:

Name of Child		
Officiating Rabbi		
Date of Conversion		

YAHR	ZEITS						
Name		Relationship		Date of Death		Before/After Sundown	
FAMIL	Y MEMBERS ASSOCI	ATED WITH	TBH-BE	SPECIAL ACCO	OMMOD	ATIONS: Please list any	
	I		nship	accommodations needed for participation			
		<u> </u>					
GET II	NVOLVED!			1			
	would like more inform	nation, check	Member #1 o	r Member #2 and w	e will co	ontact you.	
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	Adult Learning		Home & School Association		Reli	Religious Services	
	Boomers (empty neste	ers) Havurah/Lay-		Led Services R		esponse to Hunger Initiative	
	Hesed Network		Holocaust Edu	ucation	Sisterhood		
	Choir		House & Grounds		Social Action		
	College Outreach Cook for a Friend Earlly Childhood Center Family Education		Interfaith Outro	each/Keruv		Technology/Communications	
			Israel Advocad	cy Committee	Tora	Torah Study Ushering/ Greeting Youth Groups/Youth Commission	
			L'Chaim (activ		Ush		
			Marketing		You		
	Family Minyan		Membership		You	ng Explorers (young families)	
	Finance/Budget		Men's Club		Oth	er:	
Fundraising/Endowments		nts	Religious Life Committee				
Gift Shop			Religious School Committee				
	ING COMMITMENT FU						
				•		nd generations to come,	
	embers are asked to med until one adult in yo				e's Build	ding Fund. Your payment is	
	embers who are not ye				ldina Fı	und obligation by	
		•	•		•	r three, four, or five years.	
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iotal A	mout of Commitment:	Φ	RIIII	ig Period: LOVer 3	yrs.	Over 4 yrs. Over 5 yrs	
SIGNA	ATURE: Kindly sign an	d date this N	lembership Int	formation Form			
Date:		per #1:	,	Member	r #2:		

WE WELCOME YOU TO OUR TEMPLE BETH HILLEL - BETH EL COMMUNITY!