



RABBI: RICK SHERWIN **OFFICE:** 3899 SAND LAKE ROAD, LONGWOOD, FL 32779 • **PHONE:** 407.862.3505
MAIL: P.O. Box 915756, LONGWOOD, FL 32791-5756 • **E-MAIL:** SHALOM@CONGBETHAM.ORG • **WEB SITE:** WWW.CONGBETHAM.ORG

2010 Membership Application

(PLEASE PRINT)

Name to be used on address label:	
Home address:	
City, state, zip:	
Home phone:	Primary e-mail:

	Adult 1	Adult 2
Salutation	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> _____	<input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Dr. <input type="checkbox"/> _____
First name		
Last name		
Informal name		
E-mail		
Cell phone		
Anniversary date (mm,dd,yy)		
Date of birth (mm,dd,yy)		
Hebrew name **		
Father's Hebrew name **		
Mother's Hebrew name **		
Religion	<input type="checkbox"/> Jewish <input type="checkbox"/> Non-Jewish	<input type="checkbox"/> Jewish <input type="checkbox"/> Non-Jewish
Previous synagogue: affiliation & years		
Occupation		
Area of specialization		
Business phone		

**** Please do not write this in Hebrew**

Dependent Children

	Child 1 <input type="checkbox"/> female <input type="checkbox"/> male	Child 2 <input type="checkbox"/> female <input type="checkbox"/> male
First name		
Last name		
Informal name		
Address (if different)		
City, state, zip		
Phone (if different)		
E-mail		
Hebrew name **		
Date of birth (mm,dd,yy)		
School, grade		
Religious school and years attended		
Bar/Bat Mitzva date		
	Child 3 <input type="checkbox"/> female <input type="checkbox"/> male	Child 4 <input type="checkbox"/> female <input type="checkbox"/> male
First name		
Last name		
Informal name		
Address (if different)		
City, state, zip		
Phone (if different)		
E-mail		
Hebrew name **		
Date of birth (mm,dd,yy)		
School, grade		
Religious school and years attended		
Bar/Bat Mitzva date		

** Please do not write this in Hebrew

Yahrzeits

Please provide us with **all** the information requested below so that we can send you yahrzeit reminders on a timely basis.

Name	Relationship	Related To	Date of Death (mm/dd/yyyy) <i>(must have month, day & year)</i>

ANNUAL FINANCIAL COMMITMENT (January – December)

MEMBERSHIP CATEGORIES		
✓	Commitment	Category
<input type="checkbox"/>	\$1325	Family
<input type="checkbox"/>	\$ 725	Single
<input type="checkbox"/>	\$ 825	Senior couple (elder spouse is age 70 or older as of January 1)
<input type="checkbox"/>	\$ 625	Senior single (age 70 or older as of January 1)
<input type="checkbox"/>	\$ 165	Under 30, single or married
<input type="checkbox"/>	\$ 360	Associate membership (complements membership at another synagogue)
<input type="checkbox"/>	I/We cannot afford to pay the minimum commitment. Please contact me.	

My/Our annual commitment is:	\$
Building Fund for Families is \$100 per year for the first five (5) years: <i>(A one-time commitment of \$500 payable over 5 years is assessed on all new members.)</i>	\$
Building Fund for Singles and Seniors is \$50 per year for the first five (5) years: <i>(A one-time commitment of \$250 payable over 5 years is assessed on all new members.)</i>	\$
Building Maintenance & Restoration Fund: (Voluntary annual commitment towards maintenance and capital improvements. This fund is intended to eliminate the need for special assessments in the future to cover major maintenance and capital expenditures on our facilities)	\$
Total:	\$

PAYMENT PLAN (please indicate your preference):

- A - Payment in full enclosed: \$_____ Cash, check, or credit card *(please provide your credit card information below)*
- B - Semi-annual payments of \$_____ on January 1 and July 1
- C - Quarterly payments of \$_____ on January 1, April 1, July 1, and October 1.
- D - Monthly payments of \$_____ on the 1st of each month

Credit card #: _____ **Expiration date:** _____

SIGNATURE (ADULT 1)

SIGNATURE (ADULT 2)

DATE SIGNED

DATE SIGNED

Adult 1 _____ **Adult 2** _____

**We would like to be active members of the Beth Am Family
and want to be involved in the following areas:**

Adult 1	Adult 2	
		Adult Education
		Budget & Finance
		Building & Grounds
		Care Team
		Catering & Kitchen
		Choir
		Community Relations
		Education & Youth
		Fund Raising
		Membership
		Men's Club
		Parent/Teacher Organization
		Religious Activities
		Sisterhood
		Social Programs
		Telephone Contact
		Other: