

Use this form for your renewal of prior year's membership and/or new applications.

2010-2011

MEMBERSHIP APPLICATION

5771

PLEASE TYPE OR PRINT

1. Last Name _____ First _____ Hebrew Name _____

2. Last Name _____ First _____ Hebrew Name _____

Address _____ City _____ Zip _____

Phone: Home () _____ - _____ Work () _____ - _____ Cell: () _____ - _____

1. E-mail Address: _____ 2. E-mail Address: _____ Cohen 1__ 2__ Levite 1__ 2__

Birth Date: 1. ____/____/_19__ Birth Date 2. ____/____/_19__ Anniversary Date ____/____/____

School-Age Children:

Name: _____ Hebrew Name _____ Age _____ Public School Grade _____

Name: _____ Hebrew Name _____ Age _____ Public School Grade _____

Name: _____ Hebrew Name _____ Age _____ Public School Grade _____

Please send me Yahrzeit Notices for:

_____	D.O.D.	Relationship _____
_____	D.O.D.	Relationship _____
_____	D.O.D.	Relationship _____
_____	D.O.D.	Relationship _____

I/We request membership at Beth Shalom of Whittier in the following category: (Select the type applicable).

Membership includes High Holidays and all Life Cycle Events

Membership may be paid in 10 monthly billings.

_____	Family Membership ***	\$1,025.00	***Plus School Tuition. See School Application for Fee Schedule.
_____	Senior Couple Membership	\$ 700.00	
_____	Single Membership	\$ 525.00	
_____	Student Membership	\$ 300.00	
_____	Associate Membership	\$ 150.00 (No voting privileges)	

Your membership is increased in value if you participate directly in the various activities of the Congregation. Please list and/or select your special interests here.

_____ Bingo	_____ Gift Shop
_____ Special Events/Holidays	_____ Fund Raising
_____ Serving on the Board	_____ House and Grounds
_____ Sisterhood	_____ Other (Specify) _____