



Congregation Shomrei Torah

4858 Kerry Forest Parkway, Tallahassee, FL 32309

(850) 893-9674

www.shomreitorahonline.org

Membership Application

APPLICANT		SPOUSE/PARTNER	
Name (English)			
Name (Hebrew)			
Address			
Phone/Fax			
e-mail			
Occupation			
Are you: Born Jewish <input type="checkbox"/> Jewish by Conversion <input type="checkbox"/>		Born Jewish <input type="checkbox"/> Jewish by conversion <input type="checkbox"/>	
Date/Place of Conversion:		Date/Place of Conversion:	
Name of Rabbi:		Name of Rabbi:	
Are You A: <input type="checkbox"/> Kohayn <input type="checkbox"/> Levite		<input type="checkbox"/> Kohayn <input type="checkbox"/> Levite	
<input type="checkbox"/> Israelite <input type="checkbox"/> Other Faith		<input type="checkbox"/> Israelite <input type="checkbox"/> Other Faith	
Children:	Names	Birthdate	
Children's Previous Religion/Hebrew School			
Names	School	Years	

Yahrzeits		
Name	Relation	Secular Date / Before/After sunset?

SERVICE TO SYNAGOGUE: I am interested in the following committees:

- | | | | |
|--------------------------------------------|--------------------------------------|--------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Education | <input type="checkbox"/> Ritual | <input type="checkbox"/> Membership | <input type="checkbox"/> Budget/Finance |
| <input type="checkbox"/> Newsletter | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Men's Club (\$36) | <input type="checkbox"/> House/Building |
| <input type="checkbox"/> Sisterhood (\$36) | <input type="checkbox"/> Catering | <input type="checkbox"/> Oneg Shabbat | <input type="checkbox"/> Youth Groups |

MEMBERSHIP AND ANNUAL DUES:

	Dues Amount	Building Fund	Security Fee
Family	\$750.00	\$300.00	\$200.00
Individual	\$375.00	\$150.00	\$100.00
*Associate in-town	\$250.00	_____	_____
*(Please confirm you are a member of another synagogue in Tallahassee)			
Synagogue Name		_____	
Associate out-of-town	\$75.00	_____	_____
Name & Location of Synagogue		_____	
Student	\$0.00	_____	_____

I WOULD LIKE TO JOIN CONGREGATION SHOMREI TORAH AS A/AN

_____ **MEMBER WHOSE DUES ARE OUTLINED ABOVE.**

Signature

Date

Please return this form to Congregation Shomrei Torah via mail or drop off at the office.