



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 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 | Date |
| | | |
| | | |
| | | |
| | | |

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 (\$20) | <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 | \$250.00 | \$144.00 |
| Individual | \$375.00 | \$150.00 | \$72.00 |
| Associate in-town | \$250.00 | _____ | _____ |
| Associate out-of-town | \$75.00 | _____ | _____ |
| 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.