

Temple Beth El

"Where Judaism Lives"

MEMBERSHIP APPLICATION

Welcome to Temple Beth El

We are committed to caring for all of our members and strive to provide a meaningful Jewish experience. Each person affiliated with our congregation is extremely important to us. We would appreciate your assistance by completing the membership application so we may better serve you.

> 2906 Loma Linda Drive Bakersfield California 93305 (661) 322-7607 <u>www.templebethelbakersfield.org</u> <u>tbebakersfield@gmail.com</u>

TEMPLE BETH EL MEMBERSHIP APPLICATION

Mailing Name and Address

| Name: | Date: | | | | |
|-----------------------------|------------------------------------------------|----------------------------------------------|--------------------------------------------------------------------------------------|--|--|
| Address: | City: | | State & Zip: | | |
| Personal Information | Adult Memb | per #1 (M1) | Adult Member #2 (M2) | | |
| Full Name | | | | | |
| Preferred to be called | | | _ | | |
| Hebrew Name (if known) | | | | | |
| Home Telephone Number | | | | | |
| Cell Number | | | | | |
| Email Address | | | | | |
| Occupation/Position/Retired | | | | | |
| Employer/Self Employed | | | | | |
| Business City and State | | | | | |
| Work Phone Number | | | | | |
| Date of Birth | | | | | |
| Marital Status | Married (Dat | e of Marrigae) | | | |
| | Single | Separated Div | vorced Widowed | | |
| Religious Tradition | Reform | Conservative | Reform Conservative | | |
| Rengious municip | Orthodox Non-Jewish Reli Jew by Choice - | None gion Practiced Date of Conversion | Orthodox None Non-Jewish Religion Practiced Jew by Choice - Date of Conversion | | |
| Date of Bar/Bat Mitzvah | jew by choice - | | | | |
| Previous Congregation | | | | | |
| | | | | | |

My/Our Household

List of Dependent Children and Others in Household and Relationship

| Name | | | Name | | |
|-------------------------------|---|---|------------------------------------|---|---|
| Hebrew Name | | | Hebrew Name | | |
| Date of Birth | М | F | Date of Birth | М | F |
| School/Grade/ Relationship | | | School/Grade/ Relationship F | | |
| Name | | | Name | | |
| Hebrew Name | | | Hebrew Name | | |
| Date of Birth | М | F | Date of Birth | М | F |
| School/Grade/ Relationship | | | School/Grade/ Relationship | | |

Please add additional names to back of this page.

Yahrzeit Information

Please list the names of those you wish to remember and check calendar you prefer: English Hebrew

| Name | Relationship | Date of Death | M1 or M2 |
|------|--------------|---------------|----------|
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| | | | |

| Do you have a cemetery plot? | Y | N Where | Y | N Where |
|------------------------------|---|---------|---|---------|
|------------------------------|---|---------|---|---------|

Special Skills and Talents You Have (teaching, photography, cooking, etc.)

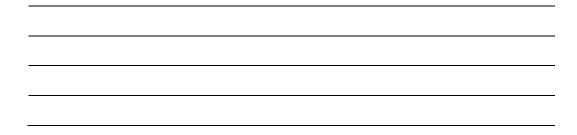
What do you expect from your association with Temple Beth El?

Activities

Please check the congregational activities which interest you.

| M1 | M2 | Activity or Committee |
|-----------|----|---------------------------------|
| | | Adult Education |
| | | Buildings/Grounds Work & Repair |
| | | Caring Committee |
| | | Choir |
| | | Fund Raising Committee |
| | | Religious School |
| | | Ha-Gan Pre-School |
| | | Kitchen Committee |
| | | Library |
| | | Membership Committee |
| | | Office Assistance |
| | | Phone Committee |
| | | Religious Practices Committee |
| | | Shofar (Temple newsletter) |
| | | Social Action |
| | | Vison Committee |

Anything else you would like to share with us or any comments?



Membership Guidelines and Financial Commitment

Annual committments are determined on a fair share basis, equaling 1.5% of your annual gross income.

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I/We also pledge one-half of our first year's commitment to Temple Beth El's Building and Maintenace Fund in the amount of \$_____. (The Building and Maintenance Fund pledge can be paid over a period of three years.)

You can enroll in our automatic payments system at: <u>https://templebethelbakersfield.org/member-dues/</u> using your credit card (Visa or Mastercard) or your checking/savings account.

Enclosed is my/our initial payment in the amount of \$_____.

Signature

Signature

or

Sponsor

Membership Chair

Thank You. We Look Forward to Your Participation.