

Temple Beth Avodah

45 Puddingstone Lane · Newton, MA 02459 · 617-527-0045
www.bethavodah.org

Membership Application—PLEASE PRINT CLEARLY

First Adult

Second Adult

First/Last Name _____ First/Last Name _____

Home Address _____

Summer/Winter Address _____

Effective Dates of Alternate Address _____

Home Phone _____

Email Address _____

Cell Phone _____

Date of Birth _____

Current Age _____

Occupation _____

Business Address _____

Business Phone _____

Religious Background _____

Previous Temple Affiliation _____

Marital Status _____ Wedding Date _____

First/Last Name of ALL Children

Name	Birth Date	Hebrew Name	Grade in School Sept. 20____ (include school or college name)
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Relatives who are currently members of the congregation:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

[Please use a separate sheet of paper if you need more space.]

Information for Yahrzeit Notification

<i>Name</i>	<i>Relationship</i>	<i>Date of Death</i>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Memorialize on the Hebrew date _____ or the English date _____ (please check one)

The Temple publishes a telephone directory/resource guide for Temple members. May we include your name, address, phone number and email on this list? **YES** **NO**

Would you like to be matched up with an active member or family that could act as a resource for you, and help facilitate your participation in Temple activities and functions? **YES** **NO**

We look forward to your participation in the Temple community. Please check off the committees and activities/projects in which you are interested. You may be contacted by the Committee Chair, Project Leader or appropriate Temple employee. Please see the "Overview of Committees" in your membership packet for committee descriptions.

Committees

- _____ Adult Education Committee
- _____ Budget Committee
- _____ Caring Community
- _____ House Committee
- _____ Preschool School Committee
- _____ Ritual Committee
- _____ Religious School Committee
- _____ Sages
- _____ Social Action Committee
- _____ Temple Sisterhood
- _____ Welcoming/Outreach to Membership
- _____ Youth Committee

Activities/Projects

- _____ BAYGL Youth Group
- _____ Adult Bar/Bat Mitzvah
- _____ Serving on Board of Trustees
- _____ Torah Study Class
- _____ Volunteer in Office When Needed
- _____ Other _____

School fees must be paid in full via a separate check submitted with this application, and the school registration forms. In addition, one-third of the membership dues and one-third of the building fund fees must be submitted along with this application.

School Tuition/Registration Child 1	\$ _____	Membership Category:	_____
School Tuition/Registration Child 2	\$ _____	Membership Dues	\$ _____
School Tuition/Registration Child 3	\$ _____	Building Fund Fees	\$ _____
School Tuition/Registration Child 4	\$ _____		
School/Fee Total	\$ _____	Membership Total	\$ _____

I/we hereby apply for membership at Temple Beth Avodah. I/we agree that in addition to paying the annual dues, I/we will fulfill my/our Building Fund obligation to the Temple. I/we understand that all school fees are additional. I/we agree to comply with the provisions of the by-laws of Temple Beth Avodah and all present and future resolutions duly enacted by the Congregation and the Board of Trustees.

Signature _____ Signature _____ Date _____