84 Lebanon Avenue P.O. Box 5 Colchester, CT 06415 1 • 203 • 537 • 2809

MEMBERSHIP APPLICATION

Halachah (Jewish law) and the by-laws of our congregation permit only Jews (persons born to a Jewish mother or converted to Judaism) to be <u>members</u> of our congregation, that is, to vote and set policy for the synagogue.

All people, Jews and non-Jews, are welcome to attend all our social, educational and religious activities. We especially welcome the non-Jewish spouses of our members.

Family Name 1		First	Hebrew Name					
					ben/b	at		
Birthda	ay	Work Phone	Personal		on/daughter	of		Mother
Family	Name 2	First	Hebrew Name ben/bat					
Birthda	ay	Work Phone	Personal		son/daughte	er of	Father	Mother
Home	Address							
Street Mailing Address (if different)			Town			State	Zipcode	
Home Phone An		Anniversary _			_			
					===== }			
CHIL								
Living	at home:							
Name		Birthdate		Name			Birthdate	
Living						V - U		
	Name	Address						×
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INTERESTS AND ABILITIES

We would love to have you become actively involved in your synagogue. Answering the following questions will help us match you with others who share your interests. Would you like to serve on one or more committees? ____ Cemetary ____Finance ____ House Hebrew School Kashrut ____ Membership _____ Policy and Procedures Ritual ____ Social Action ____Youth ____ Other: Are you interested in these synagogue affiliates? ____ Men's Club _____ Sisterhood Are you interested in activities for the following groups? Youth Young Couples _____Seniors Do you have any special talents or skills you would like to share with your congregational family? _____ Any other comments or suggestions?