



## FURTHER INFORMATION

Do you have any relatives or friends who are currently Temple Sholom members?  Yes  No

**If Yes, please list:** \_\_\_\_\_

**-How did you find out about Temple Sholom?**

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**-Are there any other reasons why you are joining?**

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## CHILDREN INFORMATION

*Please list information about any children within your household.*

### Child One

First Name	Middle Name	Last Name	Hebrew Name
Birthdate	Grade	Gender	Bar/Bat Mitzvah Date

### Child Two

First Name	Middle Name	Last Name	Hebrew Name
Birthdate	Grade	Gender	Bar/Bat Mitzvah Date

### Child Three

First Name	Middle Name	Last Name	Hebrew Name
Birthdate	Grade	Gender	Bar/Bat Mitzvah Date

*For additional children or special information, please attach a supplemental page.*

## Yahrzeit Information

If you have any yahrzeit(s) to commemorate, please provide this information:

**Yahrzeit**

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First Name	Last Name	Hebrew Name	Relationship
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Death Date	Before/After Sunset	Hebrew Death Date
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First Name	Last Name	Hebrew Name	Relationship
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Death Date	Before/After Sunset	Hebrew Death Date
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First Name	Last Name	Hebrew Name	Relationship
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Death Date	Before/After Sunset	Hebrew Death Date
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We will send you a reminder prior to the date. The name of your beloved will be read during the Shabbat service.

Check this box if you are interested in a memorial plaque to honor the sacred memory of your loved one.

There are many ways to get involved in the Temple Sholom community. We encourage all members to find their place in our community. Please indicate if you would like additional information or are interested in participating in the following programs. A community representative will reach out to you.

## Community Involvement

- |   |   |
|---|---|
| <input type="checkbox"/> Choir<br><input type="checkbox"/> Caring Community Committee<br><input type="checkbox"/> Cooking Divas<br><input type="checkbox"/> Fundraising<br><input type="checkbox"/> Social Action Committee<br><input type="checkbox"/> Soup Kitchen<br><input type="checkbox"/> Sisterhood | <input type="checkbox"/> Brotherhood<br><input type="checkbox"/> Adult Education<br><input type="checkbox"/> Rosh Hodesh Group<br><input type="checkbox"/> Book Club<br><input type="checkbox"/> Going Places with Sholom (GPS)<br><input type="checkbox"/> Hospitality |
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Let us know about your skills and passions: for example, do you play guitar? Enjoy Art? Have computer skills, etc.?

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## MEMBERSHIP CATEGORIES

Temple Sholom welcomes all who wish to join our community. It is our policy that the cost of membership should never prevent anyone from joining our congregational family or continuing their membership at Temple Sholom. If you wish to have a confidential discussion regarding dues, please contact Tom Glassman at [tglassman@smithrolfes.com](mailto:tglassman@smithrolfes.com).

### **Membership Categories\*:**

- Up to age 25 (\$180/yr.)
- 26-35 years old (\$600/yr.)\*
- 36-39 years (\$1,200/yr.)\*
- 40 years and up (\$1,800/yr.)\*
- Single Membership (\$1,000/yr.)\*

\*Plus cost of \$200 Building Fund

*Note: Membership is determined upon age of oldest member of household.*

We are so happy to have you join as a member of our community at Temple Sholom! We are delighted that you have chosen to be a part of our congregation. Someone will reach out to you shortly.

X \_\_\_\_\_  
Applicant Signature(s) Date

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### FOR OFFICE USE ONLY

Membership Type: \_\_\_\_\_

Approved Date: \_\_\_\_\_

Notes: \_\_\_\_\_

Entered Into Rakefet By: \_\_\_\_\_