

MEMBERSHIP APPLICATION

August 20, 2009 – August 20, 2010

Shalom! Welcome to the Sephardic Jewish Center of North Miami Beach, Congregation Magen David. Our Center has served as a Bet Knesset and Bet Midrash since 1970 and we now pray that with your help we continue for many years to come.

The Center is a year-round facility to celebrate Shabbat, Holidays and life-cycle events with family and friends. It is a place to name your children and to see them married. In order to maintain and preserve the ongoing beauty of our heritage while enabling all who wish to be a part of our community, the Sephardic Jewish Center has established its Membership Dues for all new members at \$375.00 for singles* and \$525 for families*.

Renewal membership dues are \$310.00 for singles and \$460.00 for families, respectively.

*Please note that our Membership dues will include one seat for the High Holidays. Kindly review the attached membership application so that you may reserve more seats for your family and friends.

We hope that you will become a member of our community and provide the information requested on this form. Only by knowing a bit about you can we truly provide for your needs.



I/We enclose: (please select a category for your membership; all categories include one High Holiday Ticket)

- \$525.00 New Family Membership
- \$375.00 New Single Member
- \$460.00 Renewal Family Membership
- \$310.00 Renewal Single Membership

And I/We enclose our first year's installment of Sisterhood Membership Dues:

- \$36.00 per 6 month period or,
 - \$52.00 per year
 - YES!**, I would like to contribute to the **Sisterhood Benevolent Fund**, helping families in need.
- My Contribution: _____

Total enclosed: _____ Full Name(s): *(Please print clearly)*

Date: _____ Signed: _____

For office use: <i>Member ID:</i> _____ <i>Date of entry:</i> ___/___/___ <i>by:</i> _____ <i>Special Notes:</i> _____

HOUSEHOLD: *Full Name(s):* _____

Marital Status:

- Single*
- Married – Anniversary Date* ___/___/___
- Divorced*
- Widowed*

Primary Home Full Mailing Address

Primary Home Phone (____) _____ (____) _____

Email Address: _____

Secondary Home (or Business) Full Mailing Address

Secondary Phone (____) _____ FAX (____) _____

Please send my mail to Primary Home during months of _____ thru _____, & to Secondary residence _____ thru _____.

I/We are also members of another Synagogue: _____ in, _____

ADULT #1

_____ (i.e. Mr., Ms., Mrs., Dr.) _____

Title _____ first name _____ last name _____

_____/_____/_____/_____ Hebrew name _____

Birthdate _____

Work: _____

Name & address of business/workplace

_____ (____) _____ (____) _____
Occupation/position work phone fax

_____ (____) _____
E-mail cell phone

Skills: Read/Speak Hebrew Read/chant Torah Teach children

Please check activities in which you would like to participate:

- Adult Education Community Outreach
- Cultural Programs Youth Group (Start-up/Organize)
- Family Programming

Volunteer Opportunities:

- Greeting & Ushering on Shabbat
- Mailing and Office help
- Sisterhood: __ Function Set Up __ Kitchen Help __ Phone Calls __ Other: _____

Please feel free to use additional pages to provide information about your children &/or grandchildren.

!!!!Attention!!!!

We highly recommend you to add your email address for schedule updates and important Bet Kenessed News!

It's an easier and cheaper way of staying in touch with you and your family.

HAZKAROT (Yartzheit)

Reminder notices for anniversary of death will be mailed as requested below [please print]:

1) Name of Loved One: _____
English Hebrew Relationship

Secular date of death ____/____/____ After sundown? __ yes __ no

Send notice of Hazkara and Recitation of Kaddish Date to: _____

relation to deceased: _____

Full Mailing Address

2) Name of Loved One: _____
English Hebrew Relationship

Secular date of death ____/____/____ After sundown? __ yes __ no

Send notice of Hazkara and Recitation of Kaddish Date to: _____

Relation to deceased: _____

Full Mailing Address

Please list additional names &/or information or comments regarding any category in the space provided below or on a separate sheet:

☛ Please contact me regarding:

- Memorial Plaques Pew Plaques Seat Plates Tree of Life
- Third Meal Receptions Kiddush Lunch Receptions

★ Please do not forget to add your email address; we would like to start sending notifications via e-mail for the upcoming year.

!!!!ATTENTION!!!!

Even if you feel we have your loved ones name and Yertzheit date in the system. PLEASE fill out this form so we can be certain that ALL of your loved ones are on our list.