## CONGREGATION SHAAREY TIKVAH

26811 Fairmount Blvd., Beachwood, Ohio 44122 Phone: 216.765.8300 Fax: 216.765.0149 www.shaareytikvah.org

## MEMBERSHIP APPLICATION

We are thrilled that you have decided to join the Shaarey Tikvah community! In order to properly welcome you, please provide us with the following information. Should you have any questions, please contact our Executive Director, Martha Sivertson, at <a href="mailto:martha@shaareytikvah.org">martha@shaareytikvah.org</a> or extension 101.



Adult 1	Adult 2	
First Name (Nickname)/Last Name	First Name (Nickname)/Last Name	
□ Male □ Female	□ Male □ Female	
Birth date	Birth date	
Email	Email	
Home/Cell phone	Home/Cell phone	
Business phone	Business phone	
Occupation	Occupation	
Hebrew name	Hebrew name	
Father's Hebrew name	Father's Hebrew name	
Mother's Hebrew name	Mother's Hebrew name	
Bar/bat mitzvah date and parsha	Bar/bat mitzvah date and parsha	
□ Kohen □ Levi □ Israel □ Not Jewish	□ Kohen □ Levi □ Israel □ Not Jewish	
Family Information		
Address		
City, State, Zip Home Phone		
Reasons for joining Congregation Shaarey Tikvah		
Additional synagogue affiliation (if any) / Membership in good standing?   Yes  No		
Former synagogue affiliation (if any) and date resigned / Membership in good standing?   No		
Wedding date, city, and officiating Rabbi, if relevant		

Children (please attach another page, if necessary)				
Name	Name	Name	Name	
Birth date	Birth date	Birth date	Birth date	
Hebrew name	Hebrew name	Hebrew name	Hebrew name	
Grade	Grade	Grade	Grade	
School	School	School	School	
Bar/bat mitzvah date and parsha	Bar/bat mitzvah date and parsha	Bar/bat mitzvah date and parsha	Bar/bat mitzvah date and parsha	
Spouse/Partner's name	Spouse/Partner's name	Spouse/Partner's name	Spouse/Partner's name	
Wedding date	Wedding date	Wedding date	Wedding date	
City of residence	City of residence	City of residence	City of residence	

## **Areas of Interest**

Our community thrives because our members tend to be actively involved in the life of our synagogue. Please let us know how you'd like to get involved. Here are some of our most popular volunteer opportunities – we hope you'll select a few!

Adult 1 ☐ Teaching an adult education course ☐ Leading an adult education Lunch	Adult 2 ☐ Teaching an adult education course ☐ Leading an adult education Lunch	Children (specify name)  ☐ Teaching an adult education course ☐ Leading an adult education Lunch
& Learn	& Learn	& Learn
☐ Leading a Shabbat service	☐ Leading a Shabbat service	☐ Leading a Shabbat service
□ Reading Torah	☐ Reading Torah	☐ Reading Torah
☐ Chanting Haftarah	☐ Chanting Haftarah	☐ Chanting Haftarah
☐ Giving a d'var Torah	☐ Giving a d'var Torah	☐ Giving a d'var Torah
☐ Budget/Finance	☐ Budget/Finance	☐ Budget/Finance
☐ Membership activities	☐ Membership activities	☐ Membership activities
☐ Education activities	☐ Education activities	☐ Education activities
☐ Event planning	☐ Event planning	☐ Event planning
□ Development activities	☐ Development activities	☐ Development activities
☐ Marketing activities	☐ Marketing activities	☐ Marketing activities
□ Sisterhood	□ Sisterhood	□ Sisterhood
□ Men's Club	□ Men's Club	□ Men's Club
□ Mitzvah Corps	□ Mitzvah Corps	□ Mitzvah Corps
☐ Office/clerical assistance	☐ Office/clerical assistance	☐ Office/clerical assistance
□ Synaplex	□ Synaplex	□ Synaplex
☐ Face to Face (Holocaust education)	☐ Face to Face (Holocaust education)	☐ Face to Face (Holocaust education)
☐ Home hospitality	☐ Home hospitality	☐ Home hospitality
☐ Other (please specify):	☐ Other (please specify):	☐ Other (please specify):

Yahrzeits (please attach another page, if necessary)				
First name	First name	First name	First name	
Last name	Last name	Last name	Last name	
Hebrew name	Hebrew name	Hebrew name	Hebrew name	
Relationship	Relationship	Relationship	Relationship	
Date of death	Date of death	Date of death	Date of death	
Hebrew date of death	Hebrew date of death	Hebrew date of death	Hebrew date of death	

## Membership Agreement

I/We hereby apply for membership in Congregation Shaarey Tikvah. I promise to abide by all the rules and regulations of the congregation and to maintain my membership in good standing. Should we choose to discontinue our membership at any time, we will notify Roz Stone, Interim Executive Director, in writing.

Adult 1	Adult 2
Signature	Signature
Date	Date

A check for 25% of your annual dues must accompany this application. Congregation Shaarey Tikvah's fiscal year is July 1 - June 30, so please contact our Executive Director for pro-rated membership terms if you are joining in the middle of the year. Please also be sure to inquire about discounted membership rates for individuals and families under 40 years old.