



**Personal Information (please print clearly)**

**Adult Member #1**

Full Name \_\_\_\_\_

Name you like to be called \_\_\_\_\_

Hebrew Name (if applicable) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Title \_\_\_\_\_ Retired

Business Name & Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Business Phone \_\_\_\_\_

Special Skills, Talents, Hobbies \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Religious Affiliation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous Temple Affiliation \_\_\_\_\_

Address \_\_\_\_\_

Previous Congregational Involvement

Board Member (Title) \_\_\_\_\_

Religious School Teacher (Grade) \_\_\_\_\_

Committee/Groups \_\_\_\_\_

Emergency Contact (not living with you) \_\_\_\_\_

\_\_\_\_\_

Is there anything additional that you would like for us to know? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Adult Member #2**

Full name \_\_\_\_\_

Name you like to be called \_\_\_\_\_

Hebrew name (if applicable) \_\_\_\_\_

Date of Birth \_\_\_\_\_

Occupation \_\_\_\_\_

Title \_\_\_\_\_ Retired

Business Name & Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Business Phone \_\_\_\_\_

Special Skills, Talents, Hobbies \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Religious Affiliation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Previous Temple Affiliation \_\_\_\_\_

Address \_\_\_\_\_

Previous Congregational Involvement

Board Member (Title) \_\_\_\_\_

Religious School Teacher (Grade) \_\_\_\_\_

Committee/Groups \_\_\_\_\_

Emergency Contact (not living with you) \_\_\_\_\_

\_\_\_\_\_

Is there anything additional that you would like for us to know? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Children (please print clearly)**

**Please include grown children as well as those living at home**

English Name	Hebrew Name	Sex	Date of Birth	Grade		College
				Secular	Religious	
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

**Religious School requires a separate registration form.**

Religious School tuition is a separate charge. You must be a member in good standing of Temple Beth El to enroll your children in Religious School. Please contact the Religious School office at 704-749-3046 for more information.

For college aged children, please provide mailing and email addresses so that our College connection program can send newsletters and packages at holiday times.

<b>Name</b>	_____	_____	_____
<b>Email address</b>	_____	_____	_____
<b>Mailing address</b>	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

**Yahrzeits**

Yahrzeits are observed and announced at the religious service during the week of the date of death. Please list names of those immediate family members you wish remembered. Please indicate which date you prefer to observe.

I prefer to observe the English Date.                       I prefer to observe the Hebrew Date.

Name	State Nature of Relationship to Adult #1 and/or Adult #2	English date of death	Hebrew date of death
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Temple Beth El Annual Commitment 2011-12

For the Temple year July 1, 2011 to June 30, 2012, I (we) make the following commitments to Temple Beth El:

<b>Annual Commitment</b>	\$
<b>Religious School</b>	\$
<b>Oneg Shabbat Fund</b> ( <i>suggested amount of \$36 to help fund our Oneg Shabbats</i> )	\$
<b>Women of Reform Judaism Dues</b> <i>\$36 per person*</i>	\$ 36.00
<b>Brotherhood Dues</b> <i>\$36 per person*</i>	\$ 36.00
<b>Youth Group Total</b> <i>Amount varies with child's age</i>	\$
<b>Total</b>	\$

If you are unable to pay to your full membership level commitment or your full religious school tuition due to hardship, please contact Sara Schreiber, Executive Director at [sschreiber@beth-el.com](mailto:sschreiber@beth-el.com) or 704-749-3050 to request a hardship evaluation form to be confidentially reviewed.

A MINIMUM OF 25% OF YOUR MEMBERSHIP AMOUNT MUST BE PAID PRIOR TO SEPT. 1, 2011 IN ORDER FOR YOU TO RECEIVE YOUR HIGH HOLY DAY TICKETS.

\*You have the choice to "opt out" of membership of Brotherhood and Sisterhood if you like. Both organizations are vital to the support of our religious school, teen programs, and the overall vitality of this Temple. We hope you will stay members of both organizations.

### Annual Commitment Payment Plan (Includes annual commitment, religious school, voluntary donations, and auxiliary dues)

- Payment in full by Dec. 15, 2011       4 installments July 1 & Oct. 1, 2011/ Jan. 1 & April 1, 2012  
 2 installments July 1 & Dec. 1, 2011       10 equal installments due monthly July 1, 2011 – April 1, 2012

*Note: All payments must be completed by April 1, 2012. Payments will be pro-rated for members joining after 12/1/2011*

- My check in the amount of \$\_\_\_\_\_ is enclosed.  
 Bill my VISA or Mastercard: I understand a 2% handling fee will be added to each charge. The handling fee will be waived if the entire annual commitment amount is paid in full by Sept. 1, 2011.  
 VISA       Mastercard (VISA & Mastercard only)

Credit Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_ Code \_\_\_\_\_

### Temple Beth El Building Fund: minimum commitment of \$2,500

A requirement of membership is a \$2,500 (or more) commitment to the Temple Beth El Building Fund

I (we) pledge \$\_\_\_\_\_ to be paid as follows: \$\_\_\_\_\_ per year for \_\_\_\_\_ years (up to 5 years)

### Covenant with Temple Beth El

As a member of Temple Beth El, I understand that I am making a commitment to support the Jewish Community. I further understand that the Temple depends on this commitment, and I pledge to fulfill my financial obligation on or before April 1, 2011. If I am unable to do so, I agree to contact the Temple Executive Director to make alternative payment arrangements.

Signature \_\_\_\_\_ Date \_\_\_\_\_

- I am interested in including Temple Beth El in my will or estate planning, please contact me.

**Please complete and return to Temple Beth El, 5101 Providence Road, Charlotte, NC 28226**