

Approval Date:
 (410) 939-3170 <http://harfordjewishcenter.org/>

Membership Committee:

Name for 1 st Member: _____		Name for 2 nd Member: _____	
Personal Email: _____		Personal Email: _____	
Hebrew Name: _____		Hebrew Name: _____	
DOB: _____	Cell Ph: _____	DOB: _____	Cell Ph: _____
Jewish: Yes or No	Kohain, Levite, Israelite, IDK	Jewish: Yes or No	Kohain, Levite, Israelite, IDK
Hebrew Name: _____		Hebrew Name: _____	
Street Address: _____			
City		State:	Zip Code:
Wedding Anniversary:		Previous Synagogue & Year of Affiliation:	

Tell us about yourself :

How would you like your name(s) and title(s) to appear in our directory and mailings?

I/We hereby apply for membership of the Temple Adas Shalom. If accepted, I/we agree to abide by and conform to it's bylaws. Furthermore, I/we undertake to pay all dues when called to do so.

Signature(s) _____ Date: _____

Dependent Children/Adults Living at Home

Name for 1 st Dependent: _____	DOB: _____	Male
	Personal Email: _____	Female
	Grade: _____	
Name for 2 nd Dependent: _____	DOB: _____	Male
	Personal Email: _____	Female
	Grade: _____	
Name for 3 rd Dependent: _____	DOB: _____	Male
	Personal Email: _____	Female
	Grade: _____	

We very much appreciate a family photo returned with this membership application.

Member 1		Activities and Committees	Member 2	
Interested in	Willing to serve		Interested in	Willing to serve

Participating	on committee		Participating	on committee
		Adult Education		
		Art and Design		
		B'Nai Brith		
		Building Maintenance		
		Caring		
		Children Services/Tot Shabbat		
		Community Outreach/Social Action		
		Finance		
		Fundraising		
		Garden		
		Kitchen		
		Library		
		Membership/Welcoming		
		Music, Choir, Instrument		
		Newsletter/Advertising		
		Office Volunteer/Admin		
		ONEG Committee		
		Preschool		
		Purim Carnival		
		Religious Practices/Service Leader		
		Religious School/Teacher/Specials		
		Sanctuary/Book Room		
		Sisterhood		
		Social Activities		
		Technology		
		Youth Activities		

Rabbi Ba'al Korei Religious School Principal Preschool Director Administration Immediate Past President	Gila Ruskin Sigmund Gast Jennifer Bober Judy Rudisaile Courtney Washburn Charna Kinneberg	President Vice President - Membership Vice President - Education Secretary Treasurer Building/Ground Chair	Larry Levine Jonas Vogelhut Alain Chalmin Elyse Lassiter Kathy Winer-Lazarski Fred Edeson
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Religious Practices	Linda Needel, Mark Wolkow	Religious School Chair	Cheryl Conley
Fundraising/Social Trustees	Staci Magee, Paula Mullis	Tech Committee Chair	Mike Lazarski
Adult Education	Karen Wolkow, Brett Temple	Preschool Committee Chair	Julie Sang
Caring Committee	Hindi Kempler, Andrea Herrin	Catering Committee	Robin Way
Sisterhood President	Anne Pollin	Choir Director	Michael Mullis
B'nai B'rith President	Dr. Andrew Fridberg	Gift Shop	Lisa Phillips
ASTY President	Lauren Florio	Library	Jennifer Wing
ASTY Advisors	Sarah Folus, Jessica Magee	Oneg Chair	Charna Kinneberg
Social Action Chair	Stu Needel		

Yahrzeit

Name	Hebrew Name	Relationship to:	Date of Death, AM or PM

Yahrzeit plaques are \$_____ for members. Would you like information on purchasing Yahrzeit plaques? YES NO

Would you like your loved ones written in our Book of Remembrance (\$40+ per year)?
 YES (This Year) YES (Always-Bill my account) NO

Cemetery

Cemetery Plats are \$_____ for members when purchased in advance, \$_____ when purchased at time of need.

I/We have ___ have not ___ made arrangements at a cemetery. If you have, please give us the name/location.

I/We are ___ are not ___ interested in a cemetery space at the Temple Adas Shalom Cemetery. (Please consult with the Rabbi if you have any special or specific instructions.)

For internal use:

Revised 0915

Date Received	Date Rakefet Updated:	Date Phone Tree Updated:
Notified Membership	Notified Youth	Notified Sisterhood
Notified Rabbi	Notified Religious School	Notified Caring