Congregation B'nai Emunah Membership | Family Application

Member's Name:	
Spouse's name:	
Children's names and ages:	
Home address:	Zip Code:
Home phone:	
Member's work phone:	E-mail:
Spouse's work phone:	E-mail:
Member's workplace and position:	
Spouse's workplace and position:	
I hereby apply for membership in The Synago am a member of the Jewish community accorditions, and profess a singular affiliation with the accompanying material and declare my fait \$ per month plus a token fee for memorganization and \$1.00 per month to cover my Messenger. I understand that the congregation pledge,	ding to the commonly accepted defi- the Jewish People. I have reviewed ir-share dues commitment to be bership in our national synagogue subscription to the B'nai Emunah
Please call me to arrange credit/debit card pay withdrawal for my monthly dues.	ments or automatic checking account
Signature of Applicant:	
Signature of Membership Committee Represe	entative:
Date:	