

# The Emanuel Synagogue

160 Mohegan Drive, West Hartford, CT 06117, 860-236-1275, www.emanuelsynagogue.org

## Application for Membership

*When you join our synagogue, we want you to be able to quickly take advantage of The Emanuel programs and services that appeal to you. Knowing about you will help us inform you of these activities.*

Date \_\_\_\_\_

Adult #1

Adult #2

Your name	Spouse/Partner's name
Circle one: Mr. /Mrs. /Miss /Ms. /Dr.	Circle one: Mr. /Mrs. /Miss /Ms /Dr.
Date of Birth	Date of Birth
Circle one: Married /Single /Partner/Divorced /Widow (er)	Circle one: Married /Single /Partner/Divorced /Widow (er)
If married, your anniversary date and year	
Hebrew Names Yours Your Mother's Your Father's	Hebrew Names Yours Your Mother's Your Father's
Circle one: Kohen /Levi /Yisrael /not sure	Circle one: Kohen /Levi /Yisrael /not sure

Home Address: Street & Number \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_ Fax \_\_\_\_\_

Spouse/Partner Phone \_\_\_\_\_ Email \_\_\_\_\_ Fax \_\_\_\_\_

Children living at home/college students

Name	Hebrew Name (Hebrew or transliteration)	M or F	Birthdate

Married/independent children

Name	Hebrew Name (Hebrew or transliteration)	M or F	Birthdate

We often send emails and holiday packages to college students, so please include their address and email address.

Name	Address	Email address

Will your children be attending our religious school? \_\_\_\_\_yes \_\_\_\_\_no

If not, where do/will they receive their religious education

\_\_\_\_\_

Is it correct to assume that both adults are Jewish? \_\_\_\_\_yes \_\_\_\_\_no

If not, please indicate which *is* Jewish \_\_\_\_\_

Please list your relatives who belong to The Emanuel

\_\_\_\_\_  
\_\_\_\_\_

Adult #1	Adult #2
Occupation	Occupation
Business Name	Business Name
Business Phone	Business Phone
Business Address	Business Address
City/State/Zip	City/State/Zip

Would you like to receive synagogue mailings by (circle preferences)      email      regular mail      both

Prior Synagogue Affiliations (name of congregation, city, state)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Yahrzeit:** We will notify you every year of the dates that significant relatives of yours have died. Please list such relatives here. If you do not know the Hebrew date, we can figure it out for you.

Name	Hebrew Name	Relation	English date of death	Time of death	Hebrew date

Do you currently own cemetery plots? \_\_\_\_\_yes \_\_\_\_\_no If yes, where? \_\_\_\_\_

Do you wish to discuss purchasing plots in our cemetery at this time? \_\_\_\_\_ yes \_\_\_\_\_ no

The more you are involved in synagogue life, the more you will benefit from your Emanuel membership. Therefore we urge you to explore some of these activities. Please circle all that interest you so that we may contact you with appropriate information.

- Adult #1 (name)
- Adult Education       Religious School       Choir       Library
  - Sisterhood       Brotherhood       Minyonaires       Caring
  - Rosh Hodesh       Social Justice       Havurah       Music
  - Fundraising       Biblical Garden       Softball       Golf
  - Adult B'nai Mitzvah       Chevra Kadisha       Cemetery       Budget
  - Families with Young Children
  - Is there a group you would like to start? \_\_\_\_\_

- Adult #2 (name)
- Adult Education       Religious School       Choir       Library
  - Sisterhood       Brotherhood       Minyonaires       Caring
  - Rosh Hodesh       Social Justice       Havurah       Music
  - Fundraising       Biblical Garden       Softball       Golf
  - Adult B'nai Mitzvah       Chevra Kadisha       Cemetery       Budget
  - Families with Young Children
  - Is there a group you would like to start? \_\_\_\_\_

Do you have a talent/skill that you would like to share with the synagogue community? Please circle the skills that you can volunteer:

- Adult #1 (name)
- Teaching       Marketing/PR       Writing       Ushering
  - Website Skills       Desktop Publishing       Photography       Finance
  - Leading Services       Chanting Torah       *Haftarah*       *Megilot*
  - Graphic Design       Leadership       Other
- Adult #2 (name)
- Teaching       Marketing/PR       Writing       Ushering
  - Website Skills       Desktop Publishing       Photography       Finance
  - Leading Services       Chanting Torah       *Haftarah*       *Megilot*
  - Graphic Design       Leadership       Other

Explain \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Why did you choose to join The Emanuel? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

How did you hear about The Emanuel? \_\_\_\_\_  
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What are your expectations of synagogue affiliation? \_\_\_\_\_

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Is there anything else that you want us to know that would help you feel comfortable at The Emanuel? \_\_\_\_\_

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I/we hereby apply for membership in The Emanuel synagogue and agree to abide by its Constitution, By-Laws, and any resolutions passed at any authorized congregation and/or Board of Trustees meeting. Our fiscal year runs from June 1 through May 31 of each year.

Signature \_\_\_\_\_ Signature of spouse or partner \_\_\_\_\_

- - - - - For Office Use Only - - - - -

Membership code \_\_\_\_\_ Membership # \_\_\_\_\_  
Dues \_\_\_\_\_ F/P \_\_\_\_\_  
BF \_\_\_\_\_ Yrs \_\_\_\_\_ Beg. \_\_\_\_\_