



YES! Please contact me regarding
**Membership at
The Emanuel Synagogue!**
160 Mohegan Drive, West Hartford
06117- 860-236-1275

Your name:

Contact Email:

Contact Phone:

Prior Synagogue Affiliation: _____

*(write 'N/A' if this is your first time
joining a synagogue as an adult)*

I am interested in the following:

(check all that apply)

- _____ Family Membership, w/Children
Children's Ages: _____
- _____ Family Membership, no children
- _____ Single Adult Membership
- _____ Religious School (Kindergarten—Grade 7)
- _____ Teen Programs
- _____ Sisterhood/Brotherhood
- _____ Adult Education
- _____ Minyonaires
- _____ Other (specify):

**Thank you for your interest. A staff or volunteers
will be following up with you shortly.
We look forward to meeting you!**

Emanuel Synagogue