MT. SINAI JEWISH CENTER

of Cong. Mt. Sinai Anshe Emeth & Emes Wozedek of
Washington Heights, Inc. and Cong. Beth Hillel-Beth Israel
135 Bennett Avenue · New York, NY 10040
212-568-1900 · 212-568-2307
www.mtsinaishul.com · office@mtsinaishul.com

APPLICATION FOR MEMBERSHIP

SPECIAL SAVINGS! $100 OFF NEW FIRST YEAR PROFESSIONAL MEMBERSHIP

MEMBER TYPE

Family: Professional $360 (Reg. $460) ☐ Student* $180 ☐ *both partners must be students

Single: Professional $200 (Reg. $300) ☐ Student $100 ☐

MEMBER 1

Full Name:_____

Hebrew Name:_____

Father's Hebrew Name:_____

Father's English Name:_____

Mother's Hebrew Name:_____

Mother's English Name:_____

Gender: Male ☐ Female ☐

Tribe: Kohen ☐ Levi ☐ Yisrael ☐

Convert: Yes ☐ No ☐

Phone: _____

Email: _____

Date of Birth: _____

Occupation: _____

School (for students):_____

Expected graduation date: _____

MEMBER 2 (if applicable)

Full Name:_____

Hebrew Name:_____

Father's Hebrew Name:_____

Father's English Name:_____

Mother's Hebrew Name:_____

Mother's English Name:_____

Gender: Male ☐ Female ☐

Tribe: Kohen ☐ Levi ☐ Yisrael ☐

Convert: Yes ☐ No ☐

Phone: _____

Email: _____

Date of Birth:_____

Occupation:_____

School (for students):_____

Expected graduation date: _____

MAILING ADDRESS

_____

ADDRESS APT# CITY/STATE/ZIP

CHILDREN (if applicable)

CHILD 1: _____

English Name | Hebrew Name | Date of Birth

CHILD 2: _____

English Name | Hebrew Name | Date of Birth

CHILD 3: _____

English Name | Hebrew Name | Date of Birth

YAHRZEITS (if applicable)

Full English Name:_____

Full Hebrew Name:_____

Father's Full Hebrew Name:_____

Hebrew Date of Passing:_____

English Date of Passing:_____

Relationship:_____

Full English Name:_____

Full Hebrew Name:_____

Father's Full Hebrew Name:_____

Hebrew Date of Passing:_____

English Date of Passing:_____

Relationship:_____

WEDDING ANNIVERSARY (if applicable): _____

SKILLS & EXPERIENCE

Are their particular skills or professional experiences that you can contribute to the synagogue or share with the synagogue community? _____

_____

_____

I AM INTERESTED IN LEARNING MORE ABOUT THE FOLLOWING COMMITTEES: (check all that apply)

Building Committee	☐	Gabbaut	☐
Chessed Committee	☐	Hospitality Committee	☐
Chevra Kadisha	☐	Kiddush Committee	☐
Education Committee	☐	Membership Committee	☐
Events Committee	☐	Outreach Committee	☐
Eruv Committee	☐	Public Relations Committee	☐
Family Life Committee	☐	Ritual Committee	☐
Fundraising Committee	☐	Sisterhood	☐

Payments can be submitted online at **www.mtsinaishul.com**
or by check made payable to **Mt. Sinai Jewish Center**.