



Temple Beth Israel
MEMBERSHIP APPLICATION
P.O Box 992582 Redding, CA 96099
Physical address: 8529 Placer Rd. Redding CA

Welcome to Temple Beth Israel. We are delighted you have chosen to become part of our community. We hope that you will find membership an enriching experience and encourage you to explore the diverse opportunities for Jewish expression that TBI offers. All information in this application will be treated confidentially. Please call our Membership Chair at (530) 949-7739 if you have any questions at all or need assistance in filling out this application.

Personal Information

	ADULT APPLICANT 1		ADULT APPLICANT 2	
	Male	Female	Male	Female
Title:	Mr. Mrs. Ms. Dr. Other _____		Mr. Mrs. Ms. Dr. Other _____	
Full Name				
By what first name to you wish to be addressed (if different from above)?				
Personal Status	Single Married _____ (date)		Partnered Other _____	
Hebrew Name (if known) Please include parent(s)' Hebrew name(s) (if known)	Example: Golda bat Menachem v' Hanna OR Golda, mom Hanna, dad Menachem			
Date of Birth				
Community Affiliations				

Contact Information

How would you like your name(s) to appear on Temple mailings?

Name(s): _____

Home address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Work: _____

Cell Phone 1: _____ Cell Phone 2: _____

Email 1: _____ Email 2: _____

I would like to receive the TBI **newsletter** via email. Please **mail** me the newsletter to the above address.
 (Please choose one option)

I would like all other TBI **communications** via email.

We are trying to be friendly to the environment, so anything you can get / do by email is appreciated!

Religious Background

(No one will be denied membership based on religious background)

Religious background in which you were raised	Adult Applicant 1			Adult Applicant 2		
	Reform Orthodox Secular	Conservative Jewish unaffiliated Other	1	Reform Orthodox Secular	Conservative Jewish unaffiliated Other	

Did you become Jewish as an adult and officially convert?	___ Yes ___ N/A	___ Yes ___ N/A
Read Hebrew?	___ Some ___ Fluent ___ Barely ___ None	___ Some ___ Fluent ___ Barely ___ None

Yahrzeit Information *(anniversary of a close family member's death)*

Name	Date of death	Family Relationship	Print in Yiskor book?

Request information on purchasing a memorial leaf on our Tree of Life: gdwbuddy@sbcglobal.net

Your Children *(Of course we love to kvell about all our children, but here we're interested in those still living at home)*

	Child 1		Child 2		Child 3		Child 4	
	Male	Female	Male	Female	Male	Female	Male	Female
First name								
Last name (if different)								
Hebrew name (if known)								
Birth date (and grade if applicable)								
Is this child being raised in the Jewish faith?	Yes	No	Yes	No	Yes	No	Yes	No
Will this child be attending Religious School at Temple Beth Israel? (K-8)	Yes	No	Yes	No	Yes	No	Yes	No

At Temple Beth Israel, we believe that joining a congregation is a spiritual and emotional commitment. We encourage all congregants to become involved in all aspects of life in our congregational community. In furthering this ideal, we gently nudge, and strongly urge, you commit to participate in congregational life. Please indicate which of these areas interest you by circling them. Your participation will help strengthen the community and will make your temple experience more meaningful. You will be contacted by a congregation member with more information.

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|----------------------------------|---------------------------|--------------|------------------------|
| Ritual Affairs | Guest Speakers | Sisterhood | Music – Choir |
| Budget and Finance | Bulletin Writing, Editing | | Reading/Chanting Torah |
| Religious School Teacher | Religious School projects | | Youth Group |
| Social Action & Mitzvah Projects | Interfaith Family Support | | Fund Raising |
| Visiting the Sick and Bereaved | Provide Transportation | | Oneg help |
| Lead a Lay Service | Public Relations | Board Member | Gardening / Yard work |
| Maintenance & Building Repair | Plumbing | Carpentry | Electrical |

Other _____

What are your passions? What are your interests?