



TEMPLE ISRAEL
Jewish Community Center

Temple Israel & Jewish Community Center

475 Grove Street
Ridgewood, NJ 07450

Temple Israel:
P: 201-444-9320 | F: 201-444-9855
www.synagogue.org

RCBI:
P: 201-444-9320 ext. 216
www.RCBI-online.org



Reconstructionist
Congregation
Beth Israel
*A Contemporary
Look at Tradition*

We are very pleased that you have chosen to join Temple Israel & JCC, founded in 1952 is affiliated with the United Synagogue of Conservative Judaism and Jewish Reconstructionist Communities. To further your full involvement in the life of the congregation, we ask that you complete this application and information form. The data you share with us remains completely confidential.

Date of Application _____ Family Name _____ Home Phone _____

Home Address: _____
Street City State Zip

Marital Status: Single Married Widow/er Separated Divorced Wedding Date _____

Applicant 1

Applicant 2

Last Name _____

First Name _____

Mr./Mrs./Ms./Dr./Other _____

Hebrew Name _____

Kohen/Levi/Yisrael _____

Father's Hebrew Name _____

Mother's Hebrew Name _____

Date of Birth _____

Occupation _____

Business Name _____

Business Address _____

Business Phone _____

Cell Phone _____

Email _____

Synagogue Affiliation (Please circle one) Conservative or Reconstructionist Conservative or Reconstructionist

Applicant 1:

Religious Education: Yrs. of Relig.School _____ Bar Mitzvah Day School Hebrew High School Adult Ed.

Are you a Jew-by-choice (converted)? Yes/No If yes Denomination _____ Date: _____ Sponsoring Rabbi: _____

Please check if you are interested in any of these activities or committees: Adult Ed. B'nei Mitzvah Brandeis Men's Club B'yachad Chant Torah/Haftarah Chesed (Lovingkindness) Facilities Family Programming Hazak House Israel Action Lead Services Membership Publicity Ritual School Committee Choir Sisterhood Social Action Ushering Ways & Means Youth Other _____

Would you like to receive email announcements? _____

Applicant 2:

Religious Education: Yrs. of Relig.School _____ Bar Mitzvah Day School Hebrew High School Adult Ed.

Are you a Jew-by-choice (converted)? Yes/No If yes Denomination _____ Date: _____ Sponsoring Rabbi: _____

Please check if you are interested in any of these activities or committees: Adult Ed. B'nei Mitzvah Brandeis Men's Club B'yachad Chant Torah/Haftarah Chesed (Lovingkindness) Facilities Family Programming Hazak House Israel Action Lead Services Membership Publicity Ritual School Committee Choir Sisterhood Social Action Ushering Ways & Means Youth Other _____

Would you like to receive email announcements? _____

*Previous Congregation _____
Synagogue Name City State Phone

Years Affiliated _____ *By signing this application you are authorizing Temple Israel and your prior synagogue to share information.

Children:

First Name MI Family Name Hebrew Name Birth date Grade

First Name MI Family Name Hebrew Name Birth date Grade

First Name MI Family Name Hebrew Name Birth date Grade

First Name MI Family Name Hebrew Name Birth date Grade

First Name MI Family Name Hebrew Name Birth date Grade

Yahrzeits

Name Relationship English date (day/year, before/after sundown) Hebrew Date (if known)

Name Relationship English date (day/year, before/after sundown) Hebrew Date (if known)

Name Relationship English date (day/year, before/after sundown) Hebrew Date (if known)

Name Relationship English date (day/year, before/after sundown) Hebrew Date (if known)

Do you own cemetery lots? Yes No Cemetery: _____
Name City State

How did you hear about Temple Israel & JCC: _____

What made you decide to join Temple Israel & JCC: _____

Were you referred to Temple Israel & JCC by a member of the synagogue, if so, by whom? _____

I/we understand and accept the agreed dues and fees associated with membership, subject to adjustment by the Board of Directors at any time. I/we understand that I/we am/are obligated to pay all dues and fees for each year of my/our membership in the synagogue.

Signature _____ Date: _____

Signature _____ Date: _____

For Office Only: Date Received _____ Deposit with Application \$ _____

Membership Committee Chairperson Approval _____ Date _____

Rabbi Approval _____ Date _____ Board Approval Date _____