

Application For Membership

Personal Details

Member

Title			
Full Name			
Hebrew Name			
Date Of Birth			
Mobile Number			
Email Address			
Gender (M / F)			Status (Cohen / Levy / Yisrael)

Spouse

Title			
Full Name			
Hebrew Name			
Date Of Birth			
Mobile Number			
Email Address			
Gender (M / F)			Status (Cohen / Levy / Yisrael)

Address Line 1			
Address Line 2			
Town			
Country		Postcode	
Home Number			

Marital Status:	
Date of Wedding:	
Married under the Auspices of which Shul:	

PLEASE ENCLOSE A PHOTOCOPY OF YOUR KETUBA, the MARRIAGE CERTIFICATE

Membership Details

Please choose from the following three options.

- Membership Rate: Family £180 (per household) / Single £100 (Please circle one)
- Birkat Hashana (optional): £250 Per person per year / £400 for household per year (Please circle one)
- Kiddush sponsorship fee (optional): £5 / £10 / £15 / £20 per month

Child 1

Full Name	
Hebrew Name	
Date Of Birth	
Gender (M / F)	

Child 2

Full Name	
Hebrew Name	
Date Of Birth	
Gender (M / F)	

Child 3

Full Name	
Hebrew Name	
Date Of Birth	
Gender (M / F)	

Yorsites

Member	Applicant	Spouse
Full Name		
Hebrew Name		
Relation		
Yorsite Date		

Member	Applicant	Spouse
Full Name		
Hebrew Name		
Relation		
Yorsite Date		

Do you agree to disclose your contact details (name and address/email) to other members who are making a Simcha and wish to send an invitation?	Yes / No
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I/we declare that the details on this form are correct and that by signing this form I/we agree to the terms and conditions here within.

I/we also declare that we have read the Synagogue guidelines (published 2015) in full and agree to its terms.

Signed by applicant 1.....Signed by applicant 2.....Date:/...../.....