

Congregation Adath Israel
P.O. Box 337
Middletown, CT 06457
(860) 346-4709



MEMBERSHIP APPLICATION
(All information is kept **CONFIDENTIAL**)

Please Print

Today's Date: _____ / _____ / _____

PERSONAL INFORMATION	Adult #1	Adult #2
Title you prefer (circle one)	Mr. Mrs. Ms. Dr. Other _____	Mr. Mrs. Ms. Dr. Other _____
First Name and middle initial		
Last name		
Informal Name (nickname)		
Salutation Name(s) Dear ...		
Name(s) to be used on address labels (e.g., Mr. & Mrs.)		
Gender (circle one)	M F	M F
Relationship (circle one)	Single Married Partners Divorced Separated Widowed	
Date of marriage (if applicable)	_____ / _____ / _____	
Date of birth	_____ / _____ / _____	_____ / _____ / _____
Education (include names)	High School College Graduate School Other	High School College Graduate School Other
Home address Street		
City/State/Zip		
Home phone	() -	() -
e-mail address		
Are you related to an Adath Israel member?	N Y How? _____ Who? _____	N Y How? _____ Who? _____
Winter address	Start Date: _____ / _____ / _____	Stop Date: _____ / _____ / _____
Winter address Street		

	Adult #1	Adult #2
Winter City/State/Zip		
Winter Phone	() -	() -
Physical Restrictions (circle any which apply)	Vision Hearing Mobility Other	Vision Hearing Mobility Other
Does any member of your family have an acute medical problem that you would like the Rabbi to be aware of?	N Y _____ _____ _____ _____	

May your home phone number be distributed within the synagogue community? Y N
 May your winter address and phone number be distributed within the synagogue community? Y N
 May your e-mail address be distributed within the synagogue community? Y N

RELIGIOUS TRADITION - The following information will be helpful in developing programs for the synagogue

	Adult #1	Adult #2
Are you a (circle one)	Born Jew Jew by choice Non-Jew - Denomination _____	Born Jew Jew by choice Non-Jew - Denomination _____
If Jewish, which tradition were you raised in? (circle one)	Conservative Orthodox Reform Reconstructionist Secular	Conservative Orthodox Reform Reconstructionist Secular
Hebrew name if known, use English lettering		
Do you keep Kosher?	Y N	Y N
Extent of Jewish education (circle any/all)	Bar/Bat Mitzvah Confirmation Hebrew Day School Other _____ None	Bar/Bat Mitzvah Confirmation Hebrew Day School Other _____ None
Do you read Hebrew? (circle one)	Prayer Book Fluent N	Prayer Book Fluent N
Do you wish to participate in services?(circle one)	Hebrew portion English portion	Hebrew portion English portion
Do you own a cemetery plot elsewhere?	Y – Location _____ N	Y – Location _____ N

EMPLOYMENT INFORMATION	Adult #1	Adult #2
Occupation	Title _____	Title _____
Job Description		
Full time/part time/retired (circle one)	FT PT Retired	FT PT Retired
Self-employed (circle one)	Y N	Y N
Employer		
Business Address Street		
City/State/Zip		
Business phone	() - ext.	() - ext.

CHILDREN	Child #1	Child #2	Child #3
Gender (circle one)	M F	M F	M F
Full Name			
Informal Name (nickname)			
Hebrew name if known, use English lettering			
Address if different from yours			
Phone if different from yours	() -	() -	() -
Date of Birth	____ / ____ / ____	____ / ____ / ____	____ / ____ / ____
Secular grade as of September of this year if applicable			
Religious School (circle one)	Attended Attending Will Attend	Attended Attending Will Attend	Attended Attending Will Attend

If you have more than 3 children, please attach an additional page.

CONGREGATION ADATH ISRAEL COMMITTEE FORM

Name(s) _____ Date _____

Address _____ Phone _____

We encourage your active participation in the life of the synagogue through involvement in committees and programs. If you are interested in receiving information regarding any of the following, please check your choice(s) and you will be contacted promptly.

Adult#1	Adult#2	Committee Name	Committee Purpose
		ADULT EDUCATION	Works with the Rabbi to develop and offer a variety of Jewish education programs and study
		BIKKUR CHOLIM	Provides support and outreach to homebound, Infirm and ill Jews
		CHEVRA KADISHA	Oversees the cemetery and interment matters
		ENDOWMENT	Oversees synagogue investments
		FINANCE	Prepares and monitors the annual budget
		FUND RAISING	Raises revenue through events and programs
		HEBREW SCHOOL	Sets policy and oversees education for children in cooperation with School Directors and Rabbi
		HOUSE	Oversees maintenance of physical plant
		ISRAEL CONNECTION	Maintains synagogue ties to Israel through presentations, programs and events
		MEMBERSHIP	Plans and implements membership recruitment, integration and retention
		PERSONNEL	Oversees and reviews the staff of the synagogue
		PUBLICITY	Informs the membership and larger community about programs, events and activities presented by the synagogue
		RITUAL	Oversees the liturgy of all services and those involved
		SOCIAL ACTION	Develops education and action programs to translate Jewish moral principles into practice

Please indicate areas of particular interest: _____
