

Mount Freedom Jewish Center



פ"ה

הר חירות

Mt. Freedom Jewish Center Application for Membership 5776 - 5777

Date: _____

Name: _____ Cell Phone: _____

Home Address: _____

City/State/Zip: _____

Home Phone Number: _____ E-Mail Address: _____

Occupation: _____ Business Phone: _____

Spouse's Name: _____ Cell Phone: _____

Occupation: _____ E-Mail Address: _____

Business Phone: _____

Your Birthday: _____ Spouse's Birthday: _____
(include year) (include year)

Wedding Anniversary: _____

Children's Names

Date of Birth

_____	_____
_____	_____
_____	_____
_____	_____

Please Check: Cohen _____ Levite _____ Yisrael _____

Yahrzeits

English Date & Year

Hebrew Date

_____	_____	_____
_____	_____	_____
_____	_____	_____

Mount Freedom Jewish Center



ב"ה

הר חירות

Previous Synagogue Affiliation: _____

Is any member of the family a convert to Judaism? _____ If so, please give details:

Have you (and/or your spouse) ever been divorced? _____ If so, was there a Jewish Divorce?

I am particularly interested in volunteering:

- | | | |
|---|---|--|
| <input type="checkbox"/> Men's Club | <input type="checkbox"/> Ritual Committee | <input type="checkbox"/> Kolot (Sisterhood) |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Hebrew School | <input type="checkbox"/> Chessed Committee |
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Membership Committee | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Israel Affairs | <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Security Committee |
| <input type="checkbox"/> House Committee | <input type="checkbox"/> Teen Committee | <input type="checkbox"/> Chayei Olam Circle (Legacy) |
| <input type="checkbox"/> Kiddush Shoppers/Cooks | <input type="checkbox"/> Minyan Committee | <input type="checkbox"/> Other _____ |

Signature: _____ Date: _____

ANNUAL MEMBERSHIP DUES (Additional fees for Hebrew school, etc.)

PLUS ALL MEMBERS PAY A \$100 Security Fee

- | | |
|---------------------------------|---|
| \$1,800.00 | Family (including children to age 25)* |
| \$1,100.00 | Individual (including children to age 25)* |
| \$ 950.00 | Senior Citizen Couple (younger spouse 75 or over) |
| \$ 800.00 | Single Senior Citizen (75 or over) |
| \$ 300.00 | Associate (lives more than 30 miles away) |
| \$2,100.00, \$3,600 or \$5,400: | Sustaining, Double Chai or Triple Chai Dues (Eligible for special packages. See enclosed Membership Dues Sheet.). |
| \$1,800.00 | Building Fee (payable at \$300.00 per year beginning the second year of membership) |

* Please note that first-year membership dues are charged at one-half the above noted amount. Please return this application, along with payment of 75% of the applicable dues (unless other arrangements have been made) to MOUNT FREEDOM JEWISH CENTER, P.O. Box 202, Mt. Freedom, NJ 07970. Call the Shul Office with any questions (973) 895-2100. Fax # (973) 895-2232.