

***Indicates required field** **FAMILY INFORMATION** **NEW MEMBER**

ADULT 1:	*Title:	*First Name:	*Last Name:
*Current Home Street Address:			
*City:	*State:	*ZIP Code:	*Cell Phone: ()
*Email Address:			*Home Phone: ()
*Birth Date (MM/DD/YY):	Anniversary (MM/DD/YY):		Home Fax: ()
*Full Hebrew Name (ex.: First Name , ben/bat, Father's Name):			*Tribe (circle one): Cohen Levi Israel
Occupation:		Work Address:	
Work Email Address:			Work Phone: ()
ADULT 2:	Title:	First Name:	Last Name:
Email Address:			Cell Phone: ()
Birth Date (MM/DD/YY):	Full Hebrew Name (ex.: First Name , ben/bat, Father's Name):		
Occupation:		Work Address:	
Work Email Address:			Work Phone: ()

CHILDREN

ENGLISH NAME	M/F	FULL HEBREW NAME (e.g. First Name , ben/bat, Father's Name)	Birth Date (MM/DD/YY)	SCHOOL	EMAIL ADDRESS (if applicable)

Yahrzeit Information

TITLE	FIRST NAME	LAST NAME	FULL HEBREW NAME (ex.: First Name , ben/bat, Father's Name)	ENGLISH DATE OF DEATH (MM/DD/YY)	HEBREW DATE OF DEATH IF KNOWN	RELATED TO (ex.: which member)	RELATED HOW (ex.: uncle, aunt)

STEP 1 - SELECT A MEMBERSHIP TYPE, THEN ENTER COST IN THE COLUMN TO THE RIGHT:

MEMBERSHIP CATEGORY	MEMBERSHIP + SECURITY FEE	COST
FAMILY MEMBERSHIP (may <u>purchase</u> 2 seats below at Member rate)	\$1,615 + \$180 = \$1795	
SINGLE MEMBERSHIP (may <u>purchase</u> 1 seat below at Member rate)	\$835 + 100 = \$935	
NEWLYWEDS (1 ST Yr Married - may <u>purchase</u> 2 seats below at Member rate)	FREE	
YOUNG COUPLE (married <3 yrs., both under 34, may <u>purchase</u> 2 seats below at Member rate)	\$545 + \$20 = \$565	
YOUNG SINGLE (under age 34, may <u>purchase</u> 1 seat below at Member rate)	\$370 + \$10 = \$380	
COLLEGE STUDENT (may <u>purchase</u> 1 seat below at Member rate)	\$300	
ASSOCIATE FAMILY MEMBERSHIP (NO SEATS)	Associate Membership is only for individuals or families who are primarily members of other synagogues, but would, nevertheless, like to be associated with our Shul.	\$805 + \$90 = \$895
ASSOCIATE SINGLE MEMBERSHIP (NO SEAT)		\$505 + \$50 = \$555

STEP 2 - SELECT SEATING, THEN ENTER QUANTITY & COST IN EACH OF THE TWO COLUMNS BELOW:

SANCTUARY	SECTION	RATE PER SEAT	QUANTITY	CALCULATE	COST
Shapell Sanctuary	Men	Member Rate \$190 per seat		Men's seats x \$190 ea. =	
		<i>Add'l. Seats \$350 per seat</i>		<i>Add'l. Men's seats x \$350 ea. =</i>	
	Women	Member Rate \$190 per seat		Women's seats x \$190 ea. =	
		<i>Add'l. Seats \$350 per seat</i>		<i>Add'l. Women's seats x \$350 ea. =</i>	
Bayer Hall	Men	Member Rate \$175 per seat		Men's seats x \$175 ea. =	
		<i>Add'l. Seats \$300 per seat</i>		<i>Add'l. Men's seats x \$300 ea. =</i>	
	Women	Member Rate \$175 per seat		Women's seats x \$175 ea. =	
		<i>Add'l. Seats \$300 per seat</i>		<i>Add'l. Women's seats x \$300 ea. =</i>	
Eisenstat Hall	Men	Member Rate \$150 per seat		Men's seats x \$150 ea. =	
		<i>Add'l. Seats \$195 per seat</i>		<i>Add'l. Men's seats x \$195 ea. =</i>	
	Women	Member Rate \$150 per seat		Women's seats x \$150 ea. =	
		<i>Add'l. Seats \$195 per seat</i>		<i>Add'l. Women's seats x \$195 ea. =</i>	
Teen Minyan	<i>Boys & Girls 7th to 12th Grade</i>	\$110 per seat		Teens' seats x \$110 each =	
Explanatory Minyan	<i>Men & Women</i>	\$150 per seat		Explanatory seats x \$150 ea. =	
LOS ANGELES COMMUNITY ERUV DUES: \$54				OPTIONAL	
BETH JACOB KIDDUSH FUND - SUGGESTED DONATION: \$54, \$72, \$108, \$180, OTHER				OPTIONAL	

STEP 3 - ENTER TOTAL COST in box →

\$

SPECIAL REQUESTS:

STEP 4 - ENTER PAYMENT INFORMATION BELOW:PAYMENT METHOD : BILL ACCOUNT CHECK CC (MasterCard or VISA only) AMOUNT OF PAYMENT: \$ _____

CREDIT CARD #: _____ EXP. DATE: _____ BILLING ZIP CODE: _____

NAME ON CREDIT CARD: _____ PHONE # IF DIFFERENT FROM PAGE 1: _____

BILLING ADDRESS IF DIFFERENT FROM PAGE 1: _____

DATE SUBMITTED: _____ SIGNATURE: _____