



Congregation
Har Tzeon - Agudath Achim

1840 University Boulevard West, Silver Spring, MD 20902
301.649.3800 [phone] - 301.649.3112 [fax] - www.htaa.org - info@htaa.org

Membership Application
(as of July 1, 2015)

I. First Name (Mr.) (Mrs.) (Ms.) _____ **Last Name** _____

Work Number _____ **Occupation** _____ **Date of Birth** _____

Cell Number _____ **E-Mail** _____

Hebrew Name (full and parents' name - please transliterate) _____

Were you a Bar Mitzvah? _____ Yes _____ No **Can you lead a Service?** _____ Yes _____ No

What Parsha? _____ **What Haftorah?** _____

I am a (please circle one) Levi Kohen Israelite

II. Spouse's First Name _____ **Last Name** _____

Work Number _____ **Occupation** _____ **Date of Birth** _____

Cell Number _____ **E-Mail** _____

Hebrew Name (full and parents' name - please transliterate) _____

Were you a Bat Mitzvah? _____ Yes _____ No **Can you lead a Service?** _____ Yes _____ No

What Parsha? _____ **What Haftorah?** _____

III. Street Address _____

City, State, Zip Code _____

IV. Home Phone Number _____ **Date of Marriage** _____

V. Children

English Name _____ **Hebrew Name** _____ **Date of Birth** _____

English Name _____ **Hebrew Name** _____ **Date of Birth** _____

English Name _____ **Hebrew Name** _____ **Date of Birth** _____

English Name _____ **Hebrew Name** _____ **Date of Birth** _____

