



MEMBERSHIP FORM

July 1, 2010 - June 30, 2011

MM/DD/YY

Name: _____ Birth Date: _____
Last First Hebrew

Spouse/Partner: _____ Birth Date: _____
Last First Hebrew

Address: _____ City: _____ Zip: _____
Last First Hebrew

Home Phone: _____ Cell: _____ Spouse's Cell : _____

E-Mail Address: _____ Spouse's: _____

Wedding Anniversary (MM/DD/YY): _____

Occupation: _____ Business Phone: _____

Spouse/Partner Occupation: _____ Business Phone: _____

Dependents (Living at home or in college) **MM/DD/YY**

Name: _____ E-mail: _____ Birth Date: _____

Name: _____ E-mail: _____ Birth Date: _____

Name: _____ E-mail: _____ Birth Date: _____

Name: _____ E-mail: _____ Birth Date: _____

<u>Yahrzeits</u>	<u>Relationship & To Whom</u>	MM/DD/YY
Name: _____	_____	Date: _____
Name: _____	_____	Date: _____
Name: _____	_____	Date: _____
Name: _____	_____	Date: _____

**The Beth Or Community thrives through membership participation.
 In which of the following areas can we ask for your help?**

- | | | |
|---|--|--|
| <input type="checkbox"/> Building Upkeep/Improvements | <input type="checkbox"/> High Holy Days Ushers | <input type="checkbox"/> Publicity |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Meditation Garden/Grounds | <input type="checkbox"/> Ritual |
| <input type="checkbox"/> Education-Adult | <input type="checkbox"/> Membership | <input type="checkbox"/> Social Action |
| <input type="checkbox"/> Education-Youth | <input type="checkbox"/> Mutual Support | <input type="checkbox"/> Social Events |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Programming | <input type="checkbox"/> Website |
| <input type="checkbox"/> Other Skills/Talents _____ | | |

Each member is asked to help set up and clean up one Friday Shabbat Oneg.

First Choice: Month _____ Day _____ Second Choice: Month _____ Day _____

**Please complete the Membership Form, Dues Form, and Torah School
 Registration Form(s) (if applicable), and return them with your payment by July 31, 2010 to:**

Beth Or, 11715 S.W. 87 Avenue, Miami, Florida 33176-4305; 305-235-1419

Signature: _____ **Date:** _____