

CONGREGATION AHAVAS ACHIM

Jewish Community Center of the
Greater Newburyport-Amesbury Area

Membership Application (please print clearly)

We are a Conservative congregation, and observe Jewish customs according to this movement's ritual guidelines.

First Adult

Second Adult

First/Last Name: _____

First/Last Name _____

Home Address: _____

Summer/Winter Address _____

Effective Dates of Alternative Address _____

Home Phone _____

Email Address _____

Cell Phone _____

Date of Birth _____

Current Age _____

Occupation _____

Business Address _____

Business Phone _____

Religious Background _____

Previous Temple Affiliation _____

Marital Status _____

Wedding Date _____

First/Last Name of ALL Children

Name

Gender

DOB

Hebrew Name

_____ M F _____

_____ M F _____

_____ M F _____

_____ M F _____

Yahrzeits:

English Name

Relationship

Hebrew Name

English/Hebrew Date

Memorialize on the Hebrew date _____ or the English date _____ (please check one)

Becoming Involved:

We look forward to your participation in the temple community. Please check off any committees and activities/projects in which you are interested. You may be contacted by the Committee Chair or Project Leader.

Ritual Program Breakfasts Finance Education House/Building Tree of Life/Plaques/Tablets
Executive Board Kiddush/Onegs Membership Calling Fund-raising Bulletin Choir Youth Group
Yahrzeit Notification Torah Study Group Social Events Shabbat Services Friday Night Services Adult Education
 Other: _____

Please tell us about any special interests or talents you or family members would enjoy sharing with your fellow members.

Synagogue Skills:

Chant Torah Chant Haftarah Lead services Deliver D'var Torah Read Hebrew Speak Hebrew

Dues and Building Fund Assessment Obligations

Dues: New members receive a 50% dues reduction in their first year. (Not applicable to other assessments)

Circle one: **SINGLE** (1 adult with or without children, ex., single parent) – \$600.00 (\$3000 – 1st year only)

FAMILY (2 Adults with or without children) – \$1050.00 (\$525– 1st year only)

Building Fund Assessment: \$1000 total (1st yr. – \$250, 2nd yr. – \$250, 3rd yr. – \$250, 4th Yr. – \$250)

Tuition & Fees: Available on request.

Please send your completed application and your deposit (Single: \$100, Family: \$200) for membership dues and 1st year building fund assessment (\$250) to: **Kim Gobbi, 6 Olive Street, Newburyport, MA 01950**

If you have questions, don't hesitate call me. 978-387-0301 E-mail: membership@ahavas-achim.org

When elected to membership, I agree to abide by all the rules, regulations, and bylaws of the Constitution of Congregation Ahavas Achim. I also agree to pay the current annual dues of \$ _____, and all other assessments in full by the close of the current fiscal year (April 30th) and all future years.

I hereby enclose \$ _____.

I wish to pay my dues & assessments on the following basis: Monthly Quarterly Semi-Annually Annually

I would like to pay my assessments with my credit card: Yes No

(Applicant's signature)

(Date)

(Applicant's signature)

(Date)

Which of the following may we include in a Member Directory: Name of adults Names of children Address
Phone E-mail Please do not include me in a Members Directory