



Israel Congregation
of Manchester
*Enriching Jewish Community
in the Northshire*

Membership Application

5771 – 5772 / 2011 – 2012

Name: _____
 Hebrew Name: _____
 Circle One: Cohen Levi Israelite
 Date of Birth (mm/dd/yy): _____

Name: _____
 Hebrew Name: _____
 Circle One: Cohen Levi Israelite
 Date of Birth (mm/dd/yy): _____

Address: _____
 City/State/ZIP: _____
 Telephone: _____
 Cell Phone: _____
 E-Mail: _____

Secondary Residence & Telephone:

Dates at Secondary Residence (for mailing)

Children: Names & Dates of Birth (Under Age 21):

Your Profession: _____
 Business Phone: _____
 Spouse's Profession: _____
 Business Phone: _____

As a member of this Congregation, how may we best serve you?

Would you like to receive our newsletter through email or regular postal service? _____

Please circle any committee you or members of your family would be interested in joining.

- | | | |
|----------------|--------------------|--------------------|
| Ritual | Tikkun Olam | Youth Group |
| Shabbat Dinner | Programming | Sunshine |
| Finance | Interfaith Council | Member Relations |
| Children's Ed. | Library | Building & Grounds |
| Adult Ed. | Communications | Cemetery |

Yahrzeit Information

Relation to Member: _____ English Name: _____ Hebrew Name: _____ Date of Death including Year: _____	Relation to Member: _____ English Name: _____ Hebrew Name: _____ Date of Death including Year: _____
Relation to Member: _____ English Name: _____ Hebrew Name: _____ Date of Death including Year: _____	Relation to Member: _____ English Name: _____ Hebrew Name: _____ Date of Death including Year: _____