

**MEMBERSHIP INFORMATION***(for office use only)*

Date joined \_\_\_\_\_

*"A" member must be Jewish**"B" is spouse/partner*

	<b>"A" Member</b>	<b>"B" Member</b>
<b>Member Name</b>		
<b>Title – Mr./Mrs./Ms./Dr./other</b>		
<b>Primary Address</b>		
<b>City</b>		
<b>State/Zip Code</b>		
<b>Home Phone</b>		
<b>Email</b>		
<b>Cell Phone</b>		
<b>DATE of BIRTH (mo/dy/yyyy)</b>		
<b>Marital Status (M/S/D/W)</b>		
<b>Wedding Anniversary(mo/dy/yyyy)</b>		
<b>Sex (M/F)</b>		
<b>Bar/Bat Mitzvah Date</b>		
<i>Are you - Cohen - Levi - Israelite</i>		
<b>Hebrew Name</b> <i>(use English letters, include ben or bat)</i>		
<b>Occupation</b>		
<b>Business Phone</b>		
<b>Jewish by Birth or by Conversion</b>		
<i>Would you be interested in:</i>		
<b>Reading Hebrew (Y/N)</b>		
<b>Leading Services (Y/N)</b>		
<b>Reading Torah (Y/N)</b>		
<b>Reading Haftarah (Y/N)</b>		

Previous synagogue affiliations: \_\_\_\_\_

Preferred mailing address: \_\_\_\_\_

*If you have a second home, please complete this information:*

Date leave primary address (mmdd) \_\_\_\_\_ Date return to primary address (mmdd) \_\_\_\_\_

Second phone # \_\_\_\_\_

Second address \_\_\_\_\_

(over)

### CHILDREN

NAME	HEBREW NAME	DATE OF BIRTH

*If you wish to be notified for a yahrzeit:*

### Yahrzeit

Name of Deceased	Relationship of which member listed on other side	English date of death mo/dy/yyyy	Hebrew date of death mo/dy/yyyy

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Hazzan Ivor Lichterman