



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

Membership Application

5776 – 5777 / 2017 – 2018

Name: _____

Hebrew Name: _____

Date of Birth: _____

Spouse or Partner Name:

Hebrew Name: _____

Date of Birth: _____

Permanent Address: _____

City/State/Zip: _____

Cell Phones: _____

Emails: _____

Local Address: _____

Landline: _____

Your Profession: _____

Business Phone: _____

Spouse or Partner's Profession:

Business Phone: _____

Children Under 21 & Dates of Birth:

May we include your contact information in our online Membership Directory? YES NO

Our monthly newsletter, The Shofar, keeps our members up to date with events and each other. Would you like to receive it via email or through the postal service? _____

As a member of our congregation, how may we best serve you? _____

We believe in sharing ourselves. Our congregation functions best when our congregants contribute their times and efforts to shape what we do. Please indicate any committees you or members of your family would be interested in joining.

- | | |
|----------------------|--------------------|
| Ritual | Programming |
| Finance | Interfaith Council |
| Shabbat Dinner | Library |
| Children's Education | Communications |
| Lifelong Learning | Building & Grounds |
| Tikun Hanafesh | Membership |



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Yahrzeit Information

Relationship to Member: _____

English Name: _____

Hebrew Name: _____

Date of Death, including Year: _____

Relationship to Member: _____

English Name: _____

Hebrew Name: _____

Date of Death, including Year: _____

Relationship to Member: _____

English Name: _____

Hebrew Name: _____

Date of Death, including Year: _____

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