

MEMBERSHIP INFORMATION

Member One:

| | | | | | | |
|--|-------------|---|------------|--|-------------------------------|---------------------------------|
| Name: Title _____ | First _____ | M.I. _____ | Last _____ | Nickname _____ | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Transliterated Hebrew Name (English letters, including parents' names) _____ | | | | | | |
| Jewish? <input type="checkbox"/> Yes / <input type="checkbox"/> No | | <input type="checkbox"/> Kohen / <input type="checkbox"/> Levi / <input type="checkbox"/> Yisrael | | | | |
| Email Address _____ | | | | May we list your email in the Congregational Directory? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Cell Phone (_____) _____ - _____ | | Birth Date ____/____/____ | | | | |
| Occupation _____ | | | | At _____ | | |
| Work Phone (_____) _____ - _____ | | Emergency only? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Work email _____ Emergency only? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

Member Two:

| | | | | | | |
|--|-------------|---|------------|--|-------------------------------|---------------------------------|
| Name: Title _____ | First _____ | M.I. _____ | Last _____ | Nickname _____ | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Transliterated Hebrew Name (English letters, including parents' names) _____ | | | | | | |
| Jewish? <input type="checkbox"/> Yes / <input type="checkbox"/> No | | <input type="checkbox"/> Kohen / <input type="checkbox"/> Levi / <input type="checkbox"/> Yisrael | | | | |
| Email Address _____ | | | | May we list your email in the Congregational Directory? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |
| Cell Phone (_____) _____ - _____ | | Birth Date ____/____/____ | | | | |
| Occupation _____ | | | | At _____ | | |
| Work Phone (_____) _____ - _____ | | Emergency only? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Work email _____ Emergency only? <input type="checkbox"/> Yes <input type="checkbox"/> No | | |

Family Information:

| | | | | | |
|--------------------------|--|--|-------------|----------------|--|
| Home Address _____ | | City _____ | State _____ | Zip Code _____ | |
| Home Phone _____ - _____ | | Wedding Anniversary Date (month/day/year) ____/____/____ | | | |

I/We hereby accept membership in Herzl-Ner Tamid Conservative Congregation, and I/we promise to abide by HNT's laws, customs and regulations that are now, or may thereafter, be in effect. I am aware that my photo may be used on occasion in HNT print and web images. I/We agree to pay the annual financial commitment in support of HNT's programs and services as indicated on my/our Annual Financial Commitment Form. For this year, my/our financial commitment will be \$_____.

I/We understand that the obligations of my/our membership in this congregation additionally to include the following:

- A Building Fund assessment in support of the needs, expenses and future of our campus. This assessment is \$300 per year, with a lifetime maximum of \$3,600, payable beginning Year Two of membership.
- A Security Assessment paid annually, currently \$100 per year

| | | | |
|----------------------|----------------|----------------------|----------------|
| _____ | ____/____/____ | _____ | ____/____/____ |
| Member One Signature | Date | Member Two Signature | Date |

CHILDREN'S INFORMATION

Child One

First _____ Middle _____ Last _____ Nickname _____ M F

Transliterated Hebrew Name _____ Birth Date ____ / ____ / ____ Cell Phone (____) ____ - ____

Email _____ Secular School _____ Secular School Grade _____

Child Two

First _____ Middle _____ Last _____ Nickname _____ M F

Transliterated Hebrew Name _____ Birth Date ____ / ____ / ____ Cell Phone (____) ____ - ____

Email _____ Secular School _____ Secular School Grade _____

Child Three

First _____ Middle _____ Last _____ Nickname _____ M F

Transliterated Hebrew Name _____ Birth Date ____ / ____ / ____ Cell Phone (____) ____ - ____

Email _____ Secular School _____ Secular School Grade _____

Child Four

First _____ Middle _____ Last _____ Nickname _____ M F

Transliterated Hebrew Name _____ Birth Date ____ / ____ / ____ Cell Phone (____) ____ - ____

Email _____ Secular School _____ Secular School Grade _____

Child Five

First _____ Middle _____ Last _____ Nickname _____ M F

Transliterated Hebrew Name _____ Birth Date ____ / ____ / ____ Cell Phone (____) ____ - ____

Email _____ Secular School _____ Secular School Grade _____

WELCOME TO THE HNT FAMILY!

YAHREIT INFORMATION

(If you need assistance filling out this form, please call the synagogue office at (206) 232-8555)

Name of Deceased _____

Transliterated Hebrew Name of Deceased _____

English Date of Death (month/day/year) ____ / ____ / ____

Before Sundown After Sundown

Buried at _____

Deceased Related to Whom? _____ Deceased Related How? _____

Name of Deceased _____

Transliterated Hebrew Name of Deceased _____

English Date of Death (month/day/year) ____ / ____ / ____

Before Sundown After Sundown

Buried at _____

Deceased Related to Whom? _____ Deceased Related How? _____

Name of Deceased _____

Transliterated Hebrew Name of Deceased _____

English Date of Death (month/day/year) ____ / ____ / ____

Before Sundown After Sundown

Buried at _____

Deceased Related to Whom? _____ Deceased Related How? _____

**If you would like information about a permanent Yartzheit Plaque for any of your departed loved ones,
please call Carol Reynolds at 206-232-8555, extension 208**

WE WANT TO GET TO KNOW YOU!

Years in the Seattle area _____ Originally from _____

Previous or other current congregational affiliations: _____ Location _____ Dates _____

What was your last synagogue experience like? Have you been active in synagogue life? If so, in what capacity?

In what Jewish organizations are members of your family currently active? _____

What are your reasons for desiring membership at HNT at this time? What would you like to get from HNT?

Do you have relatives or friends who are HNT members? If so, who? _____

What would you like to give to HNT? Do you have any special talents or passions you would be willing to offer to serve the synagogue? _____

Are you interested in serving on any **committees**? If so, please indicate below:

- | | |
|---|---|
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Ritual |
| <input type="checkbox"/> Budget | <input type="checkbox"/> Religious School |
| <input type="checkbox"/> Garinim (Young Families with children ages 0-5) | <input type="checkbox"/> Social Action/Social Justice |
| <input type="checkbox"/> Shtilim (Families with children in K-2nd Grade) | <input type="checkbox"/> Youth Commission |
| <input type="checkbox"/> Membership (in reach and welcoming new families) | |

Events and Programs - please indicate your interest below:

- | | |
|---|---|
| <input type="checkbox"/> Administrative support or other occasional volunteer projects in the HNT office | <input type="checkbox"/> Morning Minyan (weekdays at 7:00 AM and Sundays & Secular Holidays at 9:00 AM) |
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Programming (volunteer help for special events and holidays) |
| <input type="checkbox"/> Daytimers (monthly lunch & a film for ages 55+) | <input type="checkbox"/> Shabbat Dinner Circle (attending or hosting dinners with arranged groups) |
| <input type="checkbox"/> Fundraising events | <input type="checkbox"/> Shabbat Greeter |
| <input type="checkbox"/> Garinim (programs for young families with children ages 0-5) | <input type="checkbox"/> Social Action Opportunities |
| <input type="checkbox"/> High Holiday Choir | <input type="checkbox"/> Teen Feed (a monthly program providing hot meals for homeless youth in the U District) |
| <input type="checkbox"/> Judaica Shop volunteer staff | <input type="checkbox"/> Torah Readers |
| <input type="checkbox"/> Minyanaires (a monthly Sunday Minyan featuring a little extra ruach and a friendly brunch) | <input type="checkbox"/> Women's League |
| <input type="checkbox"/> Mitzvah Corps | <input type="checkbox"/> Youth Group: Kadima (6 th -7 th grade) |