

"Connect. Create. Belong!"



TEMPLE EMANU-EL ENROLLMENT FORM

393 Atlantic Avenue Marblehead, MA 01945
 Phone: 781-631-9300 Fax: 781-639-1021 www.emanu-el.org

Welcome!

Our Temple Community is delighted you have chosen to join us.

PERSONAL INFORMATION

Single Married Date: _____ Partner Widowed Divorced / Separated

FIRST ADULT

SECOND ADULT

Last Name		
First Name		
Nickname		
Middle Name		
Hebrew Name, If known		
Title Preference	Mr. ___ Ms. ___ Mrs. ___ Miss ___ Dr. ___ Other: _____	Mr. ___ Ms. ___ Mrs. ___ Miss ___ Dr. ___ Other: _____
Gender		
Date of Birth	Month day year	Month day year
Street Address		
City, State, Zip		
Home Phone		
Cell Phone		
Email Address		
Correspondence	I want to receive: Temple email notices: <input type="checkbox"/> Yes <input type="checkbox"/> No Temple Bulletin: electronically <input type="checkbox"/> Yes <input type="checkbox"/> No mailed hardcopy <input type="checkbox"/> Yes <input type="checkbox"/> No	I want to receive: Temple email notices: <input type="checkbox"/> Yes <input type="checkbox"/> No Temple Bulletin: electronically <input type="checkbox"/> Yes <input type="checkbox"/> No mailed hardcopy <input type="checkbox"/> Yes <input type="checkbox"/> No
Secondary Address (Street)		
Secondary Address (City, State, Zip)		
Secondary Home Phone		
Estimated Dates at Secondary Address	From: _____ To: _____	From: _____ To: _____

Occupation		
Employer Name		
Work Phone		

RELIGIOUS HISTORY

FIRST ADULT		SECOND ADULT	
Religion of Birth	<input type="checkbox"/> Jewish <input type="checkbox"/> Other: _____	<input type="checkbox"/> Jewish <input type="checkbox"/> Other: _____	
Current Religion _____		Current Religion _____	
Previous Affiliation (as an Adult)	Name of congregation: _____	Name of congregation: _____	
	Dates: _____	Dates: _____	
	Previously paid Building Fund Y or N or Unsure	Previously paid Building Fund Y or N or Unsure	

INFORMATION ABOUT CHILD(REN) – Please complete the following information for all children including college

First Child:	First Name	Last Name	Hebrew Name (if known)
Date of Birth	Gender ↑M ↑F		School Grade at time of application
Name of Current School Attending		Plan on Attending Religious School in Coming Year	
		↑Y ↑N	

Second Child:	First Name	Last Name	Hebrew Name (if known)
Date of Birth	Gender ↑M ↑F		School Grade at time of application
Name of Current School Attending		Plan on Attending Religious School in Coming Year	
		↑Y ↑N	

Third Child:	First Name	Last Name	Hebrew Name (if known)
Date of Birth	Gender ↑M ↑F		School Grade at time of application
Name of Current School Attending		Plan on Attending Religious School in Coming Year	
		↑Y ↑N	

REMEMBRANCE OF LOVED ONES - YAHRZEIT DATES

Yahrzeits mark the anniversary date of the death of loved ones. At Shabbat services, we acknowledge those we remember by reading their names when we recite the Mourner's Kaddish.

Please provide the dates of passing of the loved ones you wish to commemorate as well as your preference of remembering them on the English or Hebrew date. We will make any necessary date conversions and inform you of the Yahrzeit date each year.

Please also provide the phonetic pronunciation of the names so we can make every effort to read them correctly.

We are happy to read the names of your loved ones regardless of their religion. (Please use additional paper for others you would like to remember if necessary.)

Yahrzeit Plaques are available for a \$750 donation, please contact the Temple Office for more information.

Full Name of Loved One	Related to: <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Relationship
Phonetic Pronunciation		
Date of Passing	Yahrzeit Observance † <input type="checkbox"/> English <input type="checkbox"/> Hebrew	
Full Name of Loved One	Related to: <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Relationship
Phonetic Pronunciation		
Date of Passing	Yahrzeit Observance † <input type="checkbox"/> English <input type="checkbox"/> Hebrew	
Full Name of Loved One	Related to: <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Relationship
Phonetic Pronunciation		
Date of Passing	Yahrzeit Observance <input type="checkbox"/> English <input type="checkbox"/> † Hebrew	
Full Name of Loved One	Related to: <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Relationship
Phonetic Pronunciation		
Date of Passing	Yahrzeit Observance † <input type="checkbox"/> English <input type="checkbox"/> † Hebrew	

WAYS TO CONNECT AT TEMPLE EMANU-EL

Our strength comes from our members.

As you become part of the Temple Emanu-El Community, we encourage you to participate in and enjoy our diverse activities and Neighborhoods that help make our vibrant Temple life possible.

PLEASE INDICATE WHAT ARE YOUR AREAS OF PARTICULAR INTEREST OR EXPERTISE:	First Adult	Second Adult
ADULT EDUCATION/LEARNING Classes, films, discussion groups, speakers, etc.		
ADULT SOCIAL ACTIVITIES Dining, theatre-going, and events with other members in our community		
ALUMNI CONNECTION Outreach to our college-age children		
FESTIVAL CELEBRATIONS Programs/parties/community dinners for Chanukah, Purim and other holidays		
INTERFAITH ACTIVITIES Outreach for members new to Judaism or interfaith family members		
SOCIAL ACTION Opportunities to participate in repairing the world " <i>tikkun olam</i> " (Mitzvah Day, Food Drives and more)		
BROTHERHOOD Men working together to sponsor monthly breakfasts with guest speakers and other programming		
SISTERHOOD Women involved in worship, education, community service and socializing		
FINANCE Budget and long-range financial planning		
DEVELOPMENT Full range of activities to help insure the Temple's wellbeing (fundraising)		
MARKETING/PR Help "Spread the Word" about our wonderful congregation		
MEMORIAL PARK Help oversee the Temple Emanu-El Memorial Park		
JEWISH MUSIC NEIGHBORHOOD Sing, Play Music, and lead services as a group		
YOUNG PROFESSIONALS NEIGHBORHOOD Mostly Social Activities for Those in their 20's and 30's		

MEMBERSHIP Welcoming new members and hosting activities to grow and maintain membership		
EVENT SUPPORT Help with special events such as concerts, comedy nights, dinners and more		
YOUNG FAMILIES NEIGHBORHOOD Participate in social and religious activities for children ages 7 and under		
YOUTH GROUP Supports our Youth Group and its many activities		
PHOTOGRAPHY Take photographs of Temple Events		
CARING COMMUNITY NEIGHBORHOOD Support our members in their times of need, help with driving people to Shabbat services or personal appointments		
SENIOR CONNECTION NEIGHBORHOOD Create and participate in activities for seniors		
FACILITIES SUPPORT Help to oversee maintenance of the Temple building and grounds		
RELIGIOUS SCHOOL Provide oversight and support for our Pre-K through grade 12 Religious School		
TECHNOLOGY Participate in all aspects of technological growth		
Other areas of interest		

Name(s) of relatives that are current members of Temple Emanu-El.

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Please share with us any other information that will help us be sensitive to your needs as part of our community (e.g. interfaith issues, unique family situations):

I/We wish to be part of the Temple Emanu-El community.

Printed Name(s): _____ Signature(s): _____

Today's Date: _____

Please return the completed form with payment to:
Temple Emanu-El 393 Atlantic Avenue Marblehead, MA 01945

Please do not hesitate to contact us at (781) 631-9300 or temple@emanu-el.org

Shalom!