



Membership Application & Religious School Registration

July 1, 2021 to June 30, 2022

New Member Information

Mr. Mrs. Ms. _____
 Dr. Other _____ Member 1 First Name Last Name

Mr. Mrs. Ms. _____
 Dr. Other _____ Member 2 First Name Last Name

Marital Status: Married/Anniversary: ____/____/____ Single Widowed Divorced Separated

Address

City State Zip Home Phone

How did you hear about us?

Current/Previous Synagogue Affiliation

Referred by

Relationship

Member 1

Member 2

Date of Birth: ____/____/____

Date of Birth: ____/____/____

Occupation

Occupation

Business Name

Business Name

Hebrew Name

Hebrew Name

Work Phone Number

Work Phone Number

Cell Phone Number

Cell Phone Number

Email Address

Email Address

Religious Tradition in which you were raised:

Religious Tradition in which you were raised:

Conservative Orthodox Reconstructionist

Conservative Orthodox Reconstructionist

Reform Other: _____

Reform Other: _____

Children

Full Name _____ Male Female

Date of Birth: ____/____/____ Grade: _____

If Student, Name of School

Full Name _____ Male Female

Date of Birth: ____/____/____ Grade: _____

If Student, Name of School

Full Name _____ Male Female

Date of Birth: ____/____/____ Grade: _____

If Student, Name of School

Full Name _____ Male Female

Date of Birth: ____/____/____ Grade: _____

If Student, Name of School

Yahrzeit Observances

Name of Deceased (English & Hebrew)

Relationship

Date of Death: ____/____/____ Before Sundown

Hebrew Date of Death: _____

Name of Deceased (English & Hebrew)

Relationship

Date of Death: ____/____/____ Before Sundown

Hebrew Date of Death: _____

Name of Deceased (English & Hebrew)

Relationship

Date of Death: ____/____/____ Before Sundown

Hebrew Date of Death: _____

Name of Deceased (English & Hebrew)

Relationship

Date of Death: ____/____/____ Before Sundown

Hebrew Date of Death: _____

What Brings You to Temple Etz Chaim?

Talents, Skills & Interests

Interests - There are many ways of getting involved in Temple life and volunteering is a great way to start. Maybe you have a special interest or talent that can be helpful to one of the many committees and departments at TEC. We are always looking for members to get more involved.

	Member 1	Member 2		Member 2	Member 2
RELIGIOUS SCHOOL			MEMBERSHIP		
Education Committee			Havurah		
Religious School Activities			Membership Committee		
Religious School Special Programs			MARKETING		
PRE-SCHOOL			Advertising		
Education Committee			Photography		
Infant/Toddler Programs			Public Relations Writing Skills		
Pre-School Special Programs			OFFICE VOLUNTEER		
USY (United Synagogue Youth)			Clerical Skills		
USY Committee			Computer Data entry skills		
USY Program Volunteer			Organizational Skills		
Purim Carnival			SPECIAL COMMITTEES		
CLUBS			Feeding the Homeless		
Adult Education			Mitzvah Committees (Helping others in our congregation in time of need)		
Book Club			Social Action (Helping others outside of our congregation)		
TECeniors (seniors programs)			Social Events Programming		
MEN'S CLUB			Strategic Planning Committee (planning for the future of TEC)		
Men's Club Activities			SPECIAL SKILLS		
Transportation (Seniors/Special needs)			Accounting		
Women of TEC			Art & Design		
Baking and Food Preparation			Collections		
Gift Shop Volunteer			Fundraising		
Women of TEC Programs			Jewish Family Life Education		
BINGO			Legal		
Thursday nights at TEC			Teaching		

Any further questions can be sent by email to office@templeetzchaim.org

Payment Information

Registration Totals from Fee Schedule

- a. Dues Commitment Annual Total: \$ _____
- b. TEC Religious School Annual Total: \$ _____
- c. Community Memberships Annual Total: \$ _____

Add lines a, b & c:

Annual Total \$ _____

Payment Options Check Enclosed CC Authorization Enclosed

- I would like to pay in full with my application.
- 12 monthly payments of \$ _____ (dues) _____ (tuition) charged on the 1st day of each month.

I/we understand that we are entitled to all membership rights and privileges by maintaining our financial obligations in good standing. Rights and privileges may be suspended if dues, fees, or school tuitions are in arrears 60 days or more. **My/our signature(s) on this Membership and Religious School Agreement obligates me/us to pay the Membership dues and Religious School tuition for the July 1, 2021 – June 30, 2022 fiscal year in full by June 30, 2022.**

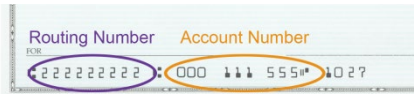
Signature(s) Date

Schedule your payment to be automatically deducted from your bank account or charged to your Visa or MasterCard. Just complete and sign this form to get started!

I _____ authorize Temple Etz Chaim to charge card or ACH indicated
(full name)
below for _____ on the _____ of each _____ for payment of my Membership.
(amount) (day or date) (month)

Billing Address _____ Phone# _____
City, State, Zip _____ Email _____

<input type="checkbox"/> Checking	<input type="checkbox"/> Savings
Name on Acct	_____
Bank Name	_____
Account Number	_____
Bank Routing #	_____
Bank City/State	_____



<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
Cardholder Name	_____
Credit Card #	_____
Exp. Date	_____
CCV#	_____

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Temple Etz Chaim in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as soon as the above noted periodic transaction dates. In the case of an ACH Transaction being rejected for Non Sufficient Funds (NSF) I understand that Temple Etz Chaim may at its discretion attempt to process the charge again within 30 days, and agree to an additional charge for each attempt returned NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company, so long as the transactions correspond to the terms indicated in this authorization form.