



BALTIMORE HEBREW CONGREGATION

APPLICATION FOR MEMBERSHIP

7401 Park Heights Avenue | Baltimore, MD 21208
P: 410-764-1587 | F: 410-764-7948 | baltimorehebrew.org

Date _____

FAMILY INFORMATION:

Person 1:

Circle one: Mr. Mrs. Miss Ms. Dr. Hon.

Last name

First name (nickname)

Maiden name

Date of birth

Married

Single

Widowed

Divorced

Couple

Anniversary

Home address Apt. #

City State Zip

Home phone

E-mail, Person 1 E-mail, Person 2

Person 2:

Circle one: Mr. Mrs. Miss Ms. Dr. Hon.

Last name

First name (nickname)

Maiden name

Date of birth

Person 1:

Profession/Occupation (former if retired)

Company/Organization

Business address

City, State, Zip

Business phone Fax

Cell phone

Person 2:

Profession/Occupation (former if retired)

Company/Organization

Business address

City, State, Zip

Business phone Fax

Cell phone

Billing address: Home Business Other _____

In case of emergency, notify Home phone

Emergency business phone Cell phone/pager

Please fill in the following information as it applies to each of your children.

Child 1:

Name (nickname)	Male/Female	
Date of birth		
Bar/Bat Mitzvah (Y/N)	Year	Where
Confirmation (Y/N)	Year	Where
Attending college (Y/N)	Where	
Cell phone	E-mail	
Marital status	Date of marriage	
Spouse name	Date of birth	

Child 2:

Name (nickname)	Male/Female	
Date of birth		
Bar/Bat Mitzvah (Y/N)	Year	Where
Confirmation (Y/N)	Year	Where
Attending college (Y/N)	Where	
Cell phone	E-mail	
Marital status	Date of marriage	
Spouse name	Date of birth	

List additional children on reverse side.

Grandchildren: List name(s) and date(s) of birth

Parents, Person 1:

Parent name	If deceased, date of death
Parent name	If deceased, date of death

Parents, Person 2:

Parent name	If deceased, date of death
Parent name	If deceased, date of death

RELIGIOUS TRADITION

Person 1: Religious tradition raised: Reform Conservative Orthodox Secular
If not raised in the Jewish tradition, are you a Jew by Choice Non-Jew

Person 2: Religious tradition raised: Reform Conservative Orthodox Secular
If not raised in the Jewish tradition, are you a Jew by Choice Non-Jew

Previous Congregational Affiliation

Name and location of congregation		
Affiliation dates	Active in synagogue life (Y/N)	If so, what capacity?
Reason for resignation?		Date of resignation

PUBLICITY

May we share the joy of your birthday/anniversary with the Congregation in the Temple Bulletin and Sisterhood Uniongrams?

Person 1: Yes No

Person 2: Yes No

Do you give permission to use photographs taken at BHC in the Temple Bulletin or other printed communications?

Person 1: Yes No

Person 2: Yes No

Your children: Yes No

MEMBERSHIP DUES*

Individual First-time	Voluntary
Individual <30	Voluntary
Individual 30-34	\$340
Individual 35-39	\$740
Individual 40-44	\$1140
Individual 45+	\$1540
Family First-time	Voluntary
Family <30	Voluntary
Family 30-34	\$475
Family 35-39	\$1175
Family 40-44	\$1875
Family 45+	\$2575

YOUTH EDUCATION ACTIVITY FEES**

Aleph All-Stars & Kindergarten	\$175
1st-3rd Grades	\$275
4th-7th Grades	\$325
Discount, 2 or more siblings (4th-7th Grades)	-\$100
NextGen (8th-12th Grades)	\$100
Non-member, Aleph All-Stars & K-2nd Grades	\$475
Tutoring	\$650
In-person Tutoring	\$650
Family Mitzvah Corps, per semester	\$75
Gesher (1st-2nd Grades), per semester	\$50
Confirmation (10th Grade)	\$300
B'nai Mitzvah	\$1330

Note: Membership for families with oldest child still in our E.B. Hirsh Early Childhood Center is \$185. After oldest child completes the 4-year-old program—first year 33% of regular dues; second year 66% of regular dues; third year full dues.

*One half Membership Dues and Building Fund are due by December 31 of the current fiscal year; balance due by June 30 of the following year.

**Youth Education School fee due by November 1, 2018.

BUILDING FUND

Individual (payable over 10 years) \$1250

Family (payable over 10 years) \$2500

Individual: In consideration of the mutual promise of others, I hereby contribute to the Building Fund of the Congregation, the sum of one thousand two hundred fifty dollars (\$1250). Payable: \$125 per year for 10 years \$250 per year for 5 years

Signature

Date

Family: In consideration of the mutual promise of others, I hereby contribute to the Building Fund of the Congregation, the sum of two thousand, five hundred dollars (\$2500). Payable: \$250 per year for 10 years \$500 per year for 5 years

Signature, Person 1

Date

Signature, Person 2

Date

MEMBERSHIP CATEGORIES

I/we would like to apply for the following category of membership (check one):

- Family Membership (two or more adults including children under age 30):** Entitles a family to all membership privileges and seats for the High Holy Days for you and your children under the age of 30. \$_____
- Individual Membership (one adult including children under age 30):** Open to individuals with all membership privileges and a seat for the High Holy Days for you and your children under the age of 30. \$_____

Building Fund \$_____ payable over _____ years

Initial_____ Date_____

DUES ADJUSTMENT REQUEST

Baltimore Hebrew Congregation membership is open to all. INFO: Jo Ann Windman, Executive Director, 410-764-1587, ext. 223 or jwindman@baltimorehebrew.org, who will submit your request to BHC's Dues Review Committee.

ACKNOWLEDGEMENT OF MEMBERSHIP OBLIGATIONS

I/we hereby apply for membership to Baltimore Hebrew Congregation. If I/we become a member, I/we agree to abide by the Bylaws, rules and regulations of the Congregation, including the timely payment of items such as, but not limited to, dues, fees and Building Fund. I/we understand that failure to do so may result in suspension or termination of my/our membership.

I/we understand that four optional items may appear on my/our membership bill July 1 of each year, unless we opt out. They are Brotherhood, Sisterhood, Parents' Association (Youth Education families only) and ARZA (supports Reform Judaism in Israel) dues.

Members pay in full for the year in which they resign. All resignations from the Congregation must be in writing. I/we understand that if I/we resign from the Congregation without meeting my/our financial obligations, Baltimore Hebrew Congregation has the right to legal action.

Signature, Person 1

Signature, Person 2

Date

HELP US GROW!

Don't forget to tell your friends and family about our voluntary dues option.

Interviewed by

Membership packet received