

CONGREGATION EMANU-EL OF THE CITY OF NEW YORK

A Bold Reform Congregation Where Warmth and Majesty Meet

APPLICATION FOR MEMBERSHIP

At Temple Emanu-El, we welcome all who wish to participate in Jewish life: singles, couples and families of all forms; interfaith couples; individuals with disabilities; all people regardless of age, race, sexual orientation, gender identity or expression, or financial means. Together we will share moments of joy, as well as times of sadness, as we immerse ourselves in the beauty of our tradition. As a member, you will become part of the rich history of our congregation, which has served and led the New York Jewish community for more than 170 years.

As part of your application, please provide the data requested below. All information shared is intended to help us best serve you and will be kept confidential.

MEMBER 1	MEMBER 2
Title	Title
Last Name	Last Name
First Name	First Name
Middle Name	Middle Name
Nickname	
INICKHAITIE	Nickhame
Date of Birth	Date of Birth
Gender	Gender
Marital Status	
Single Married Partnered	Divorced Widowed
Date of Anniversary (If applicable)	

Temple Emanu–El 1 Application for Membership

CONTACT INFORMATION

City		State	Zip Code	
Home Phone	Cell Phone	Work Phone	E-mail	
Preferred Method of (Communication			
Home Phone	Cell Phone	Work Phone	E-mail	
oreferred method of r	receiving updates an	d news from Temple	Emanu-El?	
Paper Mail	E-mail			
Oo you have another	home where you spe	end considerable am	ount of time?	
Yes, contact information				
Street Address				
City		State	Zip Code	
Home Phone		 E-mail		
Home Phone	· · · · · · · · · · · · · · · · · · ·			
What is your primary School, the Emanu-El our community, etc.) Please provide the na	Skirball Center, Savi	emple Emanu-El? (Su v, a life cycle event, c	uch as the Nursery School, Reli our clergy, the historical nature ers of Congregation Emanu-El	of
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BACKGROUND INFORMATION

MEMBER 1	MEMBER 2
Hebrew Name (If applicable)	Hebrew Name (If applicable)
Religious Upbringing (check all that apply)	Religious Upbringing (check all that apply)
Reform Conservative	Reform Conservative
Reconstructionist Orthodox	Reconstructionist Orthodox
Secular Non-Jewish	Secular Non-Jewish
If you converted to Judaism, when and where did you convert?	If you converted to Judaism, when and where did you convert?
Were you previously a member of another synagogue? If yes, please tell us the name and location of the synagogue.	Were you previously a member of another synagogue? If yes, please tell us the name and location of the synagogue.
Tes.	O Tes.
HIGHER EDUCATION	HIGHER EDUCATION
School Attended	School Attended
Degree: Year of Graduation:	Degree: Year of Graduation:
School Attended	School Attended
Degree: Year of Graduation:	Degree: Year of Graduation:
School Attended	School Attended
Degree: Year of Graduation:	Degree: Year of Graduation:
PROFESSION	PROFESSION
Occupation	Occupation
Employer	Employer
Work Address	Work Address
State Zip Code	State Zip Code
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FAMILY INFORMATION

For additional children, please attach separate sheets.

CHILD 1		CHILD 2	
Full Name		Full Name	
Nickname	Hebrew Name	Nickname	Hebrew Name
Gender		Gender	
Date of Birth		Date of Birth	
School	Grade (If applicable)	School	Grade (If applicable)
Married/Partnero	ed) No	Married/Partner	red) No
Full name of Spo	ouse/Partner (If applicable)	Full name of Sp	ouse/Partner (If applicable
CHILD 3 Full Name		CHILD 4 Full Name	
Nickname	Hebrew Name	Nickname	Hebrew Name
Gender		Gender	
Date of Birth		Date of Birth	
School	Grade (If applicable)	School	Grade (If applicable
Married/Partne	ered No	Married/Partnei	red) No
Full name of Sp	oouse/Partner (If applicable)	Full name of Sp	ouse/Partner (If applicable

YAHRZEIT (ANNIVERSARY OF DEATH) NOTIFICATION

We invite you to share information about loved ones for whom you would like to receive yahrzeit notifications. For additional family members, please attach separate sheets.

RELATIVE 1	RELATIVE 2
Full Name	Full Name
Relationship to Member	Relationship to Member
Date of Death	Date of Death
On which date would you like to observe yahrzeit?	On which date would you like to observe yahrzeit?
Hebrew English/Gregorian	Hebrew English/Gregorian
If you would like us to identify the Hebrew date in order to observe yahrzeit, please share when your relative passed (if known).	If you would like us to identify the Hebrew date in order to observe yahrzeit, please share when your relative passed (if known)
Before Sunset After Sunset	Before Sunset After Sunset
RELATIVE 3	RELATIVE 4
Full Name	Full Name
Relationship to Member	Relationship to Member
Date of Death	Date of Death
On which date would you like to observe yahrzeit? Hebrew English/Gregorian	On which date would you like to observe yahrzeit? Hebrew English/Gregorian
If you would like us to identify the Hebrew date in order to observe yahrzeit, please share when your relative passed (if known).	If you would like us to identify the Hebrew date in order to observe yahrzeit, please share when your relative passed (if known)
Before Sunset After Sunset	Before Sunset After Sunset
CEMETERY ARRANGEMENTS	
Do you have a cemetery plot? If yes, please tell us	s its name and address.
Yes:	No
If you do not have a cemetery, Congregation Ema	anu_El has two Salom Fields and Both_El which
straddle Kings and Queens counties and are local Nassau County. Would you be interested in receiv	ted near Manhattan, Northern New Jersey and
Ves No	

GET CONNECTED

There are many wonderful opportunities to get involved at Temple Emanu-El. Please indicate with which group(s) you identify (check all that apply), and someone will be in touch to help you get connected.

Families with young children	Adult singles
Families with school-age children	Parents of post-B'nai Mitzvah children
Young adults (ages 22-35)	New empty nesters (not retired)
Young couples (ages 30-45)	Retirees
Interfaith couples and/or families	Other:
Temple Emanu-El also has a wide range of prograwhich you can take part. Please indicate if you are of the groups and programs below.	
Family Worship Services and Activities	Adult Education Programming at the Temple Emanu-El Skirball Center:
Men's Club (Brotherhood)	Art
Nursery School	
Religious School	Food/Cuisine
Saviv (20's and 30's group)	Foreign Affairs
Shabbat and High Holy Day Ushers	Hebrew
Temple sponsored trips (Local/Domestic)	History
	Israel
Temple sponsored trips (Overseas)	Jewish Studies
Tikkun Olam/Social Action and other volunteer opportunities	Literature
Volunteer Choir	Movies
Weekday Sunset Service/Minyan	Music
Women's Auxiliary (Sisterhood)	Politics
Youth and Teen Activities	Other:
Is there anything else you would like to share (succongregation, or benefits you are looking to gain	,