

BAIS MEDRASH OF BERGENFIELD
371 South Prospect Ave
Bergenfield, NJ 07621

MEMBERSHIP AND AFFILIATE MEMBERSHIP FORM - 2016/2017

DATE _____

Membership Information

Membership dues are \$700 per year and a building fund of \$1000 per year for eight years. Affiliate membership dues are \$275 per year. The Shul's fiscal year begins on July 1. New full members joining after January 1 may pay dues of \$350 for the remainder of the year. Shul membership is available to those who are financially unable to satisfy the financial commitment described above. If a member is unable to commit to the financial obligations described above, or needs assistance in obtaining a payment plan, please contact the Shul President or Treasurer. Any such communications will be kept confidential. Please return this form along with payment to Joel Krinitz at 139 Dudley Drive, Bergenfield, New Jersey 07621.

FULL MEMBER _____ **AFFILIATE MEMBER** _____

FAMILY

Last Name _____

Wife's last name (if different) _____

Address _____ Town _____ Zip _____

Home Phone _____

E-mail Address (Husband) _____

E-mail Address (Wife) _____

HUSBAND Please circle one: Kohen Levi Yisrael

WIFE

First Name _____ Date of Birth * __/__/__

First Name _____ Date of Birth* __/__/__

Hebrew Name _____

Hebrew Name _____

Father's Hebrew Name _____

Father's Hebrew Name _____

Mother's Hebrew Name _____

Mother's Hebrew Name _____

Occupation _____ Bus# _____ Cell# _____

Occupation _____ Bus# _____ Cell# _____

PLEASE INDICATE IF YOU ARE A MEMBER OR AFFILIATE OF ANY OTHER SHUL

Name of shul _____ Affiliate _____ Member _____

Name of shul _____ Affiliate _____ Member _____

MINOR CHILDREN

1-Name _____ Hebrew Name _____

3-Name _____ Hebrew Name _____

M or F _____ Date of Birth* __/__/__

M or F _____ Date of Birth* __/__/__

2-Name _____ Hebrew Name _____

4-Name _____ Hebrew Name _____

M or F _____ Date of Birth* __/__/__

M or F _____ Date of Birth* __/__/__

Yahrzeit Information

1. Relative of Wife ___ Husband ___

Relationship _____

Hebrew Date of Yahrzeit _____

Name _____

Hebrew Name _____

2. Relative of Wife ___ Husband ___

Relationship _____

Hebrew Date of Yahrzeit _____

Name _____

Hebrew Name _____

3. Relative of Wife ___ Husband ___

Relationship _____

Hebrew Date of Yahrzeit _____

Name _____

Hebrew Name _____

4. Relative of Wife ___ Husband ___

Relationship _____

Hebrew Date of Yahrzeit _____

Name _____

Hebrew Name _____

* Date of Birth information is optional and need not be completed.