



NEW MEMBERSHIP

Membership Type: \$590 Couple/Family \$295 Individual

Adult #1

Name: _____ Date of Birth: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Which is your preferred method of contact? (Please select one) Home Cell Email

Birthday (month and day) _____ Occupation (former or present) _____

Address _____ City _____ State _____ Zip _____

Resident: Full time Winter Visitor Summer address (if different): _____

Hobbies/Interests: _____

Adult #2

Name: _____ Date of Birth: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Which is your preferred method of contact? (Please select one) Home Cell Email

Birthday (month and day) _____ Occupation (former or present): _____

Hobbies/Interests: _____

Marital Status: Married w/Partner Single Widowed Anniversary: _____

Additional Family Members:

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Name: _____ Date of Birth: _____

Emergency contact (name, phone and/or email address): _____

PARTICIPATION

We need your help. We would love for you to participate in one of our committees. Please indicate which committee you will join (select all that apply)

- | | |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Aliyas | <input type="checkbox"/> Membership |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Oneg Shabbat |
| <input type="checkbox"/> Greeter | <input type="checkbox"/> Shamus Usher |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Other _____ |

ACTIVITIES

We have a number of activities (Sally Terman Social Clubs) for you to enjoy and meet other temple members. Please select those you might be interested in joining:

- | | |
|---|--|
| <input type="checkbox"/> Book Club (read great books) | <input type="checkbox"/> Hiking |
| <input type="checkbox"/> Bridge | <input type="checkbox"/> Mah Jongg |
| <input type="checkbox"/> Culture (see different locations in Arizona) | <input type="checkbox"/> Movie (discuss specific movies) |
| <input type="checkbox"/> Dinner Club (discover new restaurants) | <input type="checkbox"/> Torah Study |
| <input type="checkbox"/> Fitness | <input type="checkbox"/> Travel |

YAHREZEITS

Name _____ Date of Passing _____

Name _____ Date of Passing _____

Name _____ Date of Passing _____

Name _____ Date of Passing _____

Names for Memorial Plaque (\$36 each)

_____	_____
_____	_____
_____	_____

Please send this form and your payment to Beth Ami Temple, 3104 E. Camelback Rd. #508, Phoenix, AZ 85016. This is a mailing address and not the location of Beth Ami Temple.