



I wish to apply for:

- Full Membership (Current Annual Dues \$1,100 + \$15 Chevrah Kadisha, Building Fund \$5,000 payable in equal installments over 3 years)
- Associate Membership (Current Annual Dues \$1,100)
- Weekday Membership (Current Annual Dues \$500)

Note: Candidacy for Associate Membership is defined in Article II, Section V of the synagogue constitution.

My signature below certifies that I have received a copy of, "THE WESLEY HILLS SYNAGOGUE CONSTITUTION," and understand my rights and obligations noted therein and will abide by the same.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

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For the purposes of bookkeeping, member communication and to receive kibbudim (honors) please complete the following information:

ENGLISH

HEBREW (as you would be called to the Torah)

Your Name \_\_\_\_\_

Your Spouses Name \_\_\_\_\_

Children's Name \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Names of others for whom you may wish to make a me'sheberach: \_\_\_\_\_

Hebrew date(s) for which you observe Yahreit: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Work/Other Phone Numbers: \_\_\_\_\_

Email Address: \_\_\_\_\_ Spouse Email: \_\_\_\_\_

Thank You for your time and interest in our synagogue. Questions may be addressed to any member of the synagogue board. Completed application should be submitted to any of the gabbayim. Members can also update your information online at [www.kbyshul.org](http://www.kbyshul.org).