

BETH ISRAEL CENTER NEW MEMBER INFORMATION

Name _____

Address _____

City/St _____ Zip _____

Phone Home _____ Work _____

FAX _____

Email _____

Birth Date _____

Anniversary Date _____

Madison Arrival Date _____

Birth Place _____

Previous Congregation _____

Previous Congregation City/St _____

Referring Member _____
(if applicable)

Employer _____

Occupation _____

College _____

Hebrew Name _____

____ Kohen ____ Levi ____ Israelite

Is anyone listed on this form not Jewish? _____
(Questions may be referred to the rabbi.)

Did you or your mother convert to Judaism with other than a Conservative or Orthodox Rabbi? ____ If so, please describe on a separate sheet.

Been to Israel? ____ On a program? _____

Modern Hebrew Skills: ____ speak ____ read ____ write

Groups In Which You Participated As A Youth:

____ Camp Ramah ____ Jewish Day School

____ Kadimah ____ United Synagogue Youth (USY)

____ USY Intl Convention ____ USY Israel Program

____ USY Wheels

____ Other Youth Group _____

____ Other Camp _____

Yahrzeits

Name/Relationship _____ Hebrew or common date and year of death

Name _____

Phone Home _____ Work _____

FAX _____

Email _____

Birth Date _____

Madison Arrival Date _____

Birth Place _____

Previous Congregation _____

Previous Congregation City/St _____

Employer _____

Occupation _____

College _____

Hebrew Name _____

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____ Other Camp _____

Yahrzeits

Name/Relationship _____ Hebrew or common date and year of death

Areas of Special Interest at BIC

____ Education ____ Social Activities
____ Social Action ____ Spiritual

Areas of Anticipated Participation

Adult Education ____
Child Education ____
Youth Activities ____
Singles Group ____

Other

Members of our congregation lead religious services and read Torah. Are you interested in learning these skills? (no experience required)

Lead Religious Service ____
Read Torah ____

If you have these skills now, may we contact you to:

Lead Religious Service ____
Read Torah ____

Are you interested in using your skills to tutor others, i.e., individual tutoring, teach in Talmud Torah, lead adult education class?

Members regularly hold daily minyanim. How often each month would you be willing to participate in:
Morning Minyan ____ Evening Minyan ____

Would you like to be part of our email list? _____

Would you like to be added to the Federation's mailing list? _____

Skills or Talents/Other Information

Completion Date _____

*****Internal Use*****

Review Date _____ By _____
ChaverWare Date _____ By _____

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Child Education ____
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Skills or Talents/Other Information

Completion Date _____

*****Internal Use*****

Review Date _____ By _____
ChaverWare Date _____ By _____

BETH ISRAEL CENTER CHILD INFORMATION

1st Child

Name _____

Living at Home? _____

School or Employer and Address

City _____ St _____ Zip _____

Email _____

Birth Date _____ Sex Male Female

Hebrew Name _____

Groups/Camps/Programs in which participate(d):

___ Camp Ramah ___ Jewish Day School

___ Kadimah ___ United Synagogue Youth (USY)

___ USY Intl Convention ___ USY Israel Program

___ USY Wheels

___ Other Youth Group _____

___ Other Camp _____

Been to Israel? ___ With program? _____

Modern Hebrew: speak ___ read ___ write _____

3rd Child

Name _____

Living at Home? _____

School or Employer and Address

City _____ St _____ Zip _____

Email _____

Birth Date _____ Sex Male Female

Hebrew Name _____

Groups/Camps/Programs in which participate(d):

___ Camp Ramah ___ Jewish Day School

___ Kadimah ___ United Synagogue Youth (USY)

___ USY Intl Convention ___ USY Israel Program

___ USY Wheels

___ Other Youth Group _____

___ Other Camp _____

Been to Israel? ___ With program? _____

Modern Hebrew: speak ___ read ___ write _____

2nd Child

Name _____

Living at Home? _____

School or Employer and Address

City _____ St _____ Zip _____

Email _____

Birth Date _____ Sex Male Female

Hebrew Name _____

Groups/Camps/Programs in which participate(d):

___ Camp Ramah ___ Jewish Day School

___ Kadimah ___ United Synagogue Youth (USY)

___ USY Intl Convention ___ USY Israel Program

___ USY Wheels

___ Other Youth Group _____

___ Other Camp _____

Been to Israel? ___ With program? _____

Modern Hebrew: speak ___ read ___ write _____

4th Child

Name _____

Living at Home? _____

School or Employer and Address

City _____ St _____ Zip _____

Email _____

Birth Date _____ Sex Male Female

Hebrew Name _____

Groups/Camps/Programs in which participate(d):

___ Camp Ramah ___ Jewish Day School

___ Kadimah ___ United Synagogue Youth (USY)

___ USY Intl Convention ___ USY Israel Program

___ USY Wheels

___ Other Youth Group _____

___ Other Camp _____

Been to Israel? ___ With program? _____

Modern Hebrew: speak ___ read ___ write _____

OTHER FAMILY INFORMATION

Please provide information for additional family members (immediate or extended) residing in the area of which you would like Beth Israel Center to be aware.

Name _____
Address _____

City _____ State _____
Zip _____
Home Phone _____
Birth Date _____ Sex Male Female
Related to _____
Relationship _____
Special Pastoral Needs? _____

Name _____
Address _____

City _____ State _____
Zip _____
Home Phone _____
Birth Date _____ Sex Male Female
Related to _____
Relationship _____
Special Pastoral Needs? _____

Thank You For Sharing This Information!

NEW MEMBER DUES COMMITMENT FORM

Welcome to Beth Israel Center! Annual dues are based on your ability to pay and your income level. New members are provided with the first year membership at one half of the standard dues rate. Beth Israel's dues year runs from September 1 through August 31. Dues are payable over the course of the year and must be fully paid by the end of the year. For those joining as new members mid-year, the new member dues will be prorated between the two years. The Treasurer will contact you to explain the proration.

To determine your dues level, follow the steps below.

First, find your dues using the table below based on your income. To use the table add the Federal Adjusted Gross Incomes of all adult members of your household and circle the appropriate Amount. Your Federal Adjustment Gross Income can be found on your most recently completed Federal tax return.

Federal Adjusted Gross Income	Amount	Federal Adjusted Gross Income	Amount
more than \$350,000	2%	170,000-179,999	3500
\$340,000-349,999	6900	160,000-169,999	3300
330,000-339,999	6700	150,000-159,999	3100
320,000-329,999	6500	140,000-149,999	2900
310,000-319,999	6300	130,000-139,999	2700
300,000-309,999	6100	120,000-129,999	2500
290,000-299,999	5900	110,000-119,999	2300
280,000-289,999	5700	100,000-109,999	2100
270,000-279,999	5500	90,000-99,999	1900
260,000-269,999	5300	80,000-89,999	1700
250,000-259,999	5100	70,000-79,999	1500
240,000-249,999	4900	60,000-69,999	1300
230,000-239,999	4700	50,000-59,999	1100
220,000-229,999	4500	40,000-49,999	900
210,000-219,999	4300	30,000-39,999	700
200,000-209,999	4100	20,000-29,999	500
190,000-199,999	3900	10,000-19,999	300
\$180,000-189,999	3700	less than \$10,000	100

Second, make your commitment below as ½ of the amount you determined above.

If, as a result of personal financial circumstances, the amount in step 2 exceeds your ability to pay, arrangements can be made with the Finance Committee. This committee is dedicated to confidentially meeting the needs of individual members while also meeting the financial needs of the congregation as a whole. Either e-mail donminer@tds.net or check the box below indicating you wish to be contacted by the Finance Committee.

TOTAL COMMITMENT _____

I/We wish to be speak to the Finance Committee to discuss personal financial arrangements.

Signature

Date

Please Print Name and Address below.