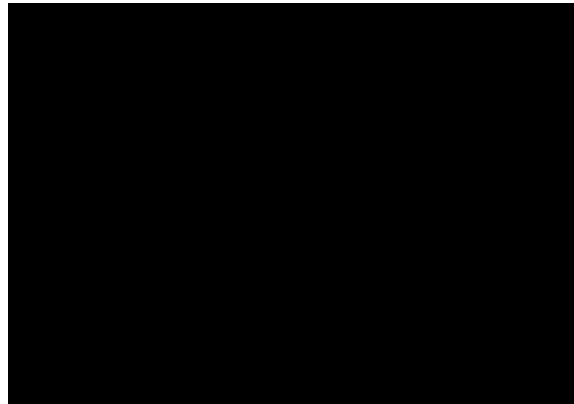


Names _____

Date _____

Temple Beth EL
2702 Arbor Drive
Madison, Wisconsin 53711
608-238-3123
fax 608-238-3125
email: tbethel@templebethelmadison.org
web: www.templebethelmadison.org



Temple Beth El Membership Application

***T**HE PURPOSE OF THIS CONGREGATION SHALL BE TO WORSHIP GOD IN ACCORDANCE WITH THE FAITH OF JUDAISM; TO CULTIVATE A LOVE AND UNDERSTANDING OF THE JEWISH HERITAGE; TO FOSTER FELLOWSHIP IN THE JEWISH COMMUNITY AND TO STRENGTHEN THE BONDS OF LOYALTY WITH THE JEWISH PEOPLE EVERYWHERE; TO BRING NEARER THE SOVEREIGNTY OF GOD THROUGH ACTS OF TIKUN OLAM. --TEMPLE BETH EL'S BYLAWS*

OFFICE USE

MC _____

FC _____

THANK YOU FOR YOUR INTEREST IN JOINING TEMPLE BETH EL. WE ARE A REFORM CONGREGATION
 FOUNDED IN 1939. TEMPLE BETH EL IS AFFILIATED WITH THE UNION FOR REFORM JUDAISM (URJ).
 PLEASE FILL OUT THIS FORM COMPLETELY. IF YOU HAVE ANY QUESTIONS CONTACT THE TEMPLE
 EXECUTIVE DIRECTOR AT (608) 238-3123.

I/WE WOULD LIKE TO JOIN TEMPLE BETH EL. I/WE UNDERSTAND THIS IS A PRELIMINARY APPLICATION,
 WHICH WILL BE COMPLETE AFTER I/WE AGREE TO A MEMBERSHIP PLEDGE WITH THE FINANCE
 COMMITTEE AND HAVE OBTAINED BOARD APPROVAL.

*HOME ADDRESS _____ *CITY/STATE/ZIP _____

*HOME PHONE _____ FAX _____
 PLEASE INDICATE THE BEST TIME AND PREFERRED PHONE NUMBER TO CALL REGARDING THIS
 APPLICATION.

ARE YOU NEW TO MADISON? YES NO

ADULT #1		ADULT #2	
*	NAME	*	NAME
*	OCCUPATION	*	OCCUPATION
*	EMPLOYER	*	EMPLOYER
	WORK ADDRESS		WORK ADDRESS
*	WORK PHONE	*	WORK PHONE
	OTHER PHONE		OTHER PHONE
*	E-MAIL	*	E-MAIL
	HEBREW NAME (IF KNOWN)		HEBREW NAME (IF KNOWN)
	BIRTH DATE		BIRTH DATE
	IF RETIRED, PREVIOUS OCCUPATION		IF RETIRED, PREVIOUS OCCUPATION

MARITAL/PARTNER STATUS _____ MARRIAGE/COMMITMENT DATE _____

PLEASE LIST ANY TEMPLE BETH EL MEMBERS THAT ARE RELATED TO YOU:

HAVE YOU PREVIOUSLY AFFILIATED WITH A TEMPLE/SYNAGOGUE? YES NO

NAME OF TEMPLE/SYNAGOGUE _____

LOCATION _____

DATES OF AFFILIATION _____

* Information to be printed in Temple Beth El directory. Let us know if you do not want any of this
 information printed.

DOES ANYONE IN YOUR FAMILY HAVE ANY SPECIAL NEEDS?

IS THERE ANYTHING ELSE YOU WOULD WANT US TO KNOW ABOUT YOU OR YOUR FAMILY?

PLEASE LIST THE FOLLOWING FOR EACH CHILD:

	CHILD 1	CHILD 2	CHILD 3	CHILD 4
NAME				
BIRTH DATE				
HEBREW NAME				

I/WE WISH INFORMATION ON:

- RELIGIOUS SCHOOL
 HEBREW SCHOOL
 MIDRASHA (HIGH SCHOOL)
 YOUTH GROUP
 YOUTH CHOIR
 OTHER _____

PLEASE TELL US YOUR RELIGIOUS BACKGROUND, IF YOU WISH.

ADULT 1 NAME	ADULT 2 NAME

TEMPLE BETH EL HAS A PROUD TRADITION OF MEMBERSHIP INVOLVEMENT. PLEASE TAKE TIME TO REVIEW THE LIST OF COMMITTEES AND ACTIVITIES AND CHECK THOSE THAT ARE OF INTEREST TO YOU. YOUR RESPONSES WILL BE SHARED WITH APPROPRIATE TBE MEMBERS AND STAFF. PLEASE CALL THE PROGRAMMING DIRECTOR IF YOU HAVE OTHER INTERESTS OR IDEAS ABOUT INVOLVEMENT WITHIN TEMPLE BETH EL.

ADULT 1	ADULT 2	COMMITTEES/ACTIVITIES
<input type="checkbox"/>	<input type="checkbox"/>	ADULT CHOIR: UNDER THE DIRECTION OF THE TEMPLE CANTOR, PROVIDES MUSIC FOR RELIGIOUS HOLIDAY SERVICES AND SPECIAL EVENTS.
<input type="checkbox"/>	<input type="checkbox"/>	ADULT EDUCATION COMMITTEE: PROMOTE LIFELONG JEWISH EDUCATION.
<input type="checkbox"/>	<input type="checkbox"/>	CARING COMMITTEE: ASSISTS THE RABBI & OTHERS IN ACTS OF COMFORT AND KINDNESS FOR THE MEMBERS OF THE CONGREGATION.
<input type="checkbox"/>	<input type="checkbox"/>	MEMBERSHIP COMMITTEE: AIMS TO WELCOME AND INVOLVE NEW MEMBERS INTO THE TEMPLE, AS WELL AS ENCOURAGING THE INVOLVEMENT OF ALL MEMBERS INTO TEMPLE LIFE THAT IS OF MEANING AND INTEREST TO THEM.

ADULT 1	ADULT 2	COMMITTEES/ACTIVITIES
<input type="checkbox"/>	<input type="checkbox"/>	MEN'S CLUB: OUR MISSION IS FOR BOTH DOING MODEST MITZVAH PROJECTS AS WELL AS SOCIALIZING TOGETHER AT TEMPLE.
<input type="checkbox"/>	<input type="checkbox"/>	PROGRAM COMMITTEE: WORKS WITH THE PROGRAM DIRECTOR TO CREATE AND IMPLEMENT EVENTS FOR THE CONGREGATION TO ENJOY.
<input type="checkbox"/>	<input type="checkbox"/>	RELIGIOUS PRACTICES COMMITTEE: WITH THE GUIDANCE OF THE RABBI AND CANTOR, WILL REVIEW THE RITUALS AND OBSERVANCES OF THE SYNAGOGUE TO ENRICH JEWISH PRACTICE AT THE TEMPLE AND AT HOME.
<input type="checkbox"/>	<input type="checkbox"/>	RELIGIOUS SCHOOL COMMITTEE: IN CONJUNCTION WITH THE TEMPLE EDUCATOR, WILL REVIEW THE EDUCATION POLICIES OF OUR RELIGIOUS SCHOOL, MAKE ALL REGULATIONS NECESSARY FOR THE RUNNING OF THE SCHOOL, AND PREPARE A PROPOSED ANNUAL BUDGET.
<input type="checkbox"/>	<input type="checkbox"/>	SISTERHOOD: OUR ACTIVE WOMEN'S GROUP ACTIVITIES INCLUDE FOUR SPEAKER PROGRAMS, FOOD-A-RAMA, SISTERHOOD SHABBAT, WOMAN'S TORAH STUDY, ANNUAL KALLAH, SOCIAL ACTION, AND ONEGS. ALL NEW WOMEN TEMPLE MEMBERS RECEIVE A COMPLIMENTARY ONE-YEAR MEMBERSHIP TO SISTERHOOD.
<input type="checkbox"/>	<input type="checkbox"/>	SOCIAL ACTION COMMITTEE: ORGANIZE PROGRAMS AND PROJECTS THAT WILL SENSITIZE THE CONGREGATION TO THE JEWISH MANDATES OF SOCIAL JUSTICE AND PROVIDE OPPORTUNITIES FOR TIKUN OLAM.
<input type="checkbox"/>	<input type="checkbox"/>	BOOK CLUB: MEETS MONTHLY TO DISCUSS THE CHOSEN BOOK OF THE MONTH. BOOKS ARE CHOSEN BY THE BOOK CLUB MEMBERS.
<input type="checkbox"/>	<input type="checkbox"/>	MUSIC COMMITTEE: <i>SUPPORTS THE WORK OF THE CANTOR AND HELPS PROMOTE A VARIED AND SATISFYING MUSICAL EXPERIENCE FOR THE WHOLE CONGREGATION. WE WOULD BE HAPPY TO WELCOME NEW MEMBERS.</i>
<input type="checkbox"/>	<input type="checkbox"/>	ISRAEL KESHER COMMITTEE: WORK WITH OUR REFORM SISTER CONGREGATION IN ISRAEL TO IMPLEMENT PROGRAMS TOGETHER WITH OUR RELIGIOUS AND HEBREW SCHOOLS. WE WILL ALSO SUPPORT AND COMMUNICATE WITH THEM BOTH FINANCIALLY AND SPIRITUALLY.
<input type="checkbox"/>	<input type="checkbox"/>	TORAH READING: TO READ TORAH DURING SERVICES.
<input type="checkbox"/>	<input type="checkbox"/>	HOUSE COMMITTEE: ASSIST THE ADMINISTRATOR IN MAINTAINING THE BUILDING AND PROPERTY OF THE CONGREGATION IN GOOD ORDER AND REPAIR.
<input type="checkbox"/>	<input type="checkbox"/>	YOUTH COMMITTEE: OVERSEE AND PROVIDE ASSISTANCE TO THE TEMPLE YOUTH GROUPS.
<input type="checkbox"/>	<input type="checkbox"/>	INTERFAITH PROGRAMS/EDUCATION/ACTIVITIES

TEMPLE BETH EL ACTIVELY ENCOURAGES THE INCLUSION OF INTERFAITH FAMILIES. I/WE ARE INTERESTED IN ATTENDING PROGRAMS FOR INTERFAITH FAMILIES (EDUCATIONAL, SOCIAL, ETC.)

YES NO

OTHER INTERESTS _____

DO YOU HAVE ANY SPECIAL SKILLS/TALENTS OR INTERESTS THAT YOU WOULD LIKE TO SHARE WITH TEMPLE BETH EL (E.G. HEBREW TEACHING OR TUTORING, COMPUTER SKILLS, BUILDING CONSTRUCTION, ARTISTIC, MUSICAL, OTHER)?

ADULT 1 _____

ADULT 2 _____

TEMPLE BETH EL
CURRENT DUES & COMMITMENT INFORMATION

PLEASE COMPLETE AND SIGN WHERE APPROPRIATE. ALL ANSWERS WILL BE KEPT IN STRICT CONFIDENCE.

TEMPLE BETH EL HAS A “FAIR SHARE DUES” SYSTEM. DUES ARE BASED ON ABILITY TO PAY RATHER THAN A SET PER MEMBER RATE. OUR CONGREGATION IS EMPHATIC IN ITS DESIRE TO WELCOME INTO MEMBERSHIP INDIVIDUALS AND FAMILIES WHO SHARE OUR GOALS REGARDLESS OF ABILITY TO PAY. LIKewise, WE HAVE A COMMUNAL RESPONSIBILITY AND COUNT ON MEMBERS’ GENEROSITY. MEMBERSHIP DUES COVER MANY TEMPLE OBLIGATIONS AND ACTIVITIES. AMONG THEM ARE:

- RELIGIOUS EDUCATION (YOUTH AND ADULT)
- RESOURCES CONNECTING US WITH UNION FOR REFORM JUDAISM
- FINANCIAL RUNNING OF THE TEMPLE
 - BUILDING AND UTILITY EXPENSES
 - PROFESSIONAL AND ADMINISTRATIVE SALARIES
- PROGRAMS AND SERVICES

PLEASE CIRCLE THE LEVEL THAT ACCURATELY REFLECTS YOUR FAMILY’S TOTAL HOUSEHOLD INCOME. WE STRONGLY ENCOURAGE APPLICANTS WHO HAVE QUESTIONS ABOUT THE TEMPLE’S FINANCIAL OBLIGATIONS TO ASK QUESTIONS. WE GENUINELY WANT TO SPEAK WITH YOU AND ADDRESS ANY QUESTIONS YOU MAY HAVE.

FAMILY INCOME	DUES AMOUNT	FAMILY INCOME	DUES AMOUNT	FAMILY INCOME	DUES AMOUNT
MORE THAN \$350,000	2%	UP TO \$250,000	\$4,900	UP TO \$140,000	2700
UP TO 350,000	\$6,900	UP TO 240,000	4700	UP TO 130,000	2475
UP TO 340,000	6700	UP TO 230,000	4500	UP TO 120,000	2275
UP TO 330,000	6500	UP TO 220,000	4300	UP TO 110,000	2050
UP TO 320,000	6300	UP TO 210,000	4100	UP TO 100,000	1850
UP TO 310,000	6100	UP TO 200,000	3900	UP TO 90,000	1650
UP TO 300,000	5900	UP TO 190,000	3700	UP TO 80,000	1425
UP TO 290,000	5700	UP TO 180,000	3500	UP TO 70,000	1200
UP TO 280,000	5500	UP TO 170,000	3300	UP TO 60,000	1000
UP TO 270,000	5300	UP TO 160,000	3100	UP TO 50,000	750
UP TO 260,000	5100	UP TO 150,000	2900	UP TO 40,000	575
				LESS THAN \$30,000	500

NEW DUES CATEGORY:	\$180/person
30 years old and under	\$360/couple (both members must be 30 or under)

MEMBERSHIP ELIGIBILITY AS PER ARTICLE III, SECTION 1 OF THE TEMPLE BETH EL BYLAWS

TEMPLE BETH EL IS A REFORM JEWISH CONGREGATION. ANY PERSON WHO SUPPORTS THE PURPOSE OF THE CONGREGATION, (AS WRITTEN ON THE COVER OF THIS APPLICATION), MAY BE APPROVED FOR MEMBERSHIP BY THE BOARD OF TRUSTEES.

MEMBERSHIP/DUES PLEDGE:

CONFIDENTIAL ACCOMMODATION IS ALWAYS AVAILABLE FOR MEMBERS WHO NEED DUES RELIEF BECAUSE OF SPECIAL CIRCUMSTANCES. PRIVATE ARRANGEMENTS CAN BE MADE THROUGH A MEMBER OF THE FINANCE COMMITTEE OR OUR EXECUTIVE DIRECTOR. TEMPLE DUES ARE PAYABLE AT THE BEGINNING OF EACH CALENDAR YEAR. APPLICATIONS SUBMITTED AFTER JUNE 30TH ARE BILLED AT HALF THE ANNUAL DUES.

ALSO: IN APPLYING FOR MEMBERSHIP IN TEMPLE BETH EL, I/WE PLEDGE TO FURTHER THE IDEALS OF JUDAISM AND OBSERVE THE BYLAWS AND POLICIES OF THE TEMPLE BETH EL BOARD OF TRUSTEES.

I/WE AGREE TO PAY \$_____ (INSERT AMOUNT FROM BRACKET ABOVE) INITIAL ANNUAL DUES BASED ON THE DUES SCHEDULE APPROVED BY THE TEMPLE BOARD OF TRUSTEES. THIS DUES LEVEL FAIRLY REPRESENTS OUR TOTAL FAMILY INCOME.

I/WE UNDERSTAND THAT IT IS MY/OUR RESPONSIBILITY TO REVIEW AND ADJUST MY/OUR ANNUAL DUES AS MY/OUR INCOME OR THE DUES SCHEDULE MAY CHANGE. MY/OUR MEMBERSHIP WILL AUTOMATICALLY RENEW ANNUALLY UNLESS I/WE NOTIFY THE TEMPLE IN WRITING OF OUR WISH TO RESIGN.

BUILDING FUND:

WE ASK ALL MEMBERS TO MAKE **TWO FINANCIAL COMMITMENTS, ONE FOR ANNUAL DUES, AND THE OTHER FOR A BUILDING FUND PLEDGE.**

ALL NEW MEMBERS ARE REQUIRED TO CONTRIBUTE TO OUR BUILDING FUND TO SUPPORT THE ONGOING MAINTENANCE OF OUR BUILDING. THIS ONE-TIME BUILDING FUND COMMITMENT IS EQUAL TO YOUR SECOND YEAR'S DUES, PAYABLE OVER THREE YEARS. I/WE WILL CONTRIBUTE AN AMOUNT EQUAL TO MY/OUR SECOND YEARS' DUES TO THE TEMPLE BUILDING FUND.

SIGNED BY:

ADULT #1	DATE	ADULT #2	DATE

ONCE YOU HAVE SUBMITTED A COMPLETED APPLICATION, YOU WILL RECEIVE TWO PHONE CALLS FROM:

- A MEMBERSHIP COMMITTEE MEMBER
- A FINANCE COMMITTEE MEMBER

PLEASE CONTACT THE EXECUTIVE DIRECTOR (608) 238-3123 WITH ANY QUESTIONS OR CONCERNS.

Yahrzeit Memorial Reminder Program

IN JANUARY 1994, TEMPLE BEGAN A YAHRZEIT MEMORIAL REMINDER PROGRAM. MEMBERS WHO PROVIDE THE NAME AND DATE OF DEATH OF IMMEDIATE FAMILY MEMBER(S) WILL BE REMINDED OF THE YAHRZEIT VIA THE BULLETIN. TO HAVE A LOVED ONE'S NAME READ DURING SHABBAT SERVICES, YOU WOULD NEED TO CALL THE TEMPLE TO HAVE THE NAME ADDED TO THE YAHRZEIT LIST FOR THAT WEEK.

ONE ALSO HAS THE ADDITIONAL OPTION OF BUYING MEMORIAL PLAQUE(S), FOR \$300 EACH, BY CONTACTING THE TEMPLE OFFICE (608) 238-3123. THE PLAQUES ARE MOUNTED IN THE MAIN HALLWAY AND MOVED INTO THE SANCTUARY DURING THE YAHRZEIT. YOU WILL, ADDITIONALLY, RECEIVE A REMINDER CARD IN THE MAIL, ANNUALLY AND YOUR LOVED ONE'S NAME WILL AUTOMATICALLY BE READ AT SHABBAT SERVICES.

CHECK THE BOX IF YOU ARE INTERESTED IN PURCHASING OPTIONAL PLAQUE(S).

IF YOU WISH TO USE THE YAHRZEIT REMINDER PROGRAM, PLEASE FILL OUT THE FOLLOWING INFORMATION FOR EACH FAMILY MEMBER YOU WISH TO COMMEMORATE. YOU WILL BE INFORMED OF THE YAHRZEIT ABOUT 3-4 WEEKS BEFORE THE ENGLISH DATE OF DEATH IN THE TEMPLE'S MONTHLY BULLETIN. PLEASE COMPLETE THE FORM BELOW AND RETURN TO TEMPLE BETH EL, 2702 ARBOR DR., MADISON 53711

LOVED ONE'S INFORMATION:	LOVED ONE'S INFORMATION
ENGLISH NAME	ENGLISH NAME
HEBREW NAME	HEBREW NAME
DATE OF DEATH (ENGLISH)	DATE OF DEATH (ENGLISH)
DATE OF DEATH (HEBREW)	DATE OF DEATH (HEBREW)
ENGLISH NAME	ENGLISH NAME
HEBREW NAME	HEBREW NAME
DATE OF DEATH (ENGLISH)	DATE OF DEATH (ENGLISH)
DATE OF DEATH (HEBREW)	DATE OF DEATH (HEBREW)

IF MORE SPACE IS NEEDED, PLEASE ATTACH A SEPARATE SHEET OF PAPER.

YOUR NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE _____

E-MAIL _____