

## Congregation B'nai Torah

6510 Hoover Road, Indianapolis, IN 46260-4606

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	MEMBE	RSHIP A	<b>PPLICATION</b> Da	te		
Name			Anniversary Date			
Hebrew Name			Address			
Father's Hebrew Name			City			
Mother's Hebrew Name			State ZIP			
Kohen Levi Yisroel			Cell Phone			
Married Single Widower Widow			E-mail			
Date of Birth			Home Phone			
Spouse's Name			Occupation			
Spouse's Maiden Name			Name of Company			
Spouse's Hebrew Name			Spouse's Cell Phone			
Spouse's Father's Hebrew Name			Spouse's Email			
Spouse's Mother's Hebrew Name			Spouse's Occupation			
Spouse's Date of Birth			Name of Company			
	CHILDR	REN IN YO	OUR HOUSEHOLD			
Name	Date of Birth	]	Hebrew Name	Name of Attending School		

## CHILDREN LIVING OUT-OF-TOWN

Name		Email Address					
Relationship to any present	member: Name	ne Relationship					
	IODDIEG						
SPECIAL SKILLS AND H	OBBIES						
Do you have a Cemetery Lo	ot? Yes No	If Yes, v	where?				
y in the second of			· · · · · · · · · · · · · · · · · · ·				
Yahrzeit Record		Date of Passing					
Name (English)	Name (Hebrew)	Hebrew	English	Relationship			
Annual Dues	1.5-29	% of gross family i	ncome				
		2					
7.							
Signature		Date					