



Bet Mishpachah Membership Application

Basic Data

	First Name	Middle Name or Initial	Last Name	
<input type="checkbox"/> Member #1				Dependent's Birth Date mm/dd/yyyy
Member # 2				
Dependent	A			
	B			
	C			
D				
Non-member Partner				

<input type="checkbox"/>	Home Address			
	City	State	Zip Code	

	Member #1	Member #2
Birth Date (mm/dd/yyyy)		
Anniversary (mm/dd/yyyy)		
Hebrew Name (use Roman letters)		
<input type="checkbox"/> Home Phone		
Work Phone		
Cell Phone		
Fax		
<input type="checkbox"/> E-Mail		
Profession		
Religion		
Denomination/Movement		
Gender Identification		
Sexual Identification		
Preferences		
<input type="checkbox"/> a Name Disclosure	<input type="checkbox"/> Newsletter <input type="checkbox"/> ATCBM <input type="checkbox"/> www	<input type="checkbox"/> Newsletter <input type="checkbox"/> ATCBM <input type="checkbox"/> www
<input type="checkbox"/> b Print Only Newsletter		

= required field needed to process application
 Optional fields help us identify and serve our member constituency

a For appearance of you name in the newsletter, ATCBM and the web site write: **Full** , First Name Only (**FNO**) or Not at All (**NO**)

b Our monthly newsletter *Mishpachah Matters* to our members is sent via the internet to the e-mail address(es) listed above **unless you request to receive the print version only.**

You may also request that copies be sent to additional e-mail addresses at no additional cost.

Additional e-mail addresses for newsletter		

Membership Application Basic Data Instructions

New members are asked to complete this form so that we can communicate with you and collect some demographic information to help us best serve your needs.

Member # 1 & #2 - Your name(s)

Dependents - list any minor children or other dependents you wish to be included in your membership

Non-member Partner - the name of your significant other, spouse, partner, who is not a member of the congregation.

Birth date/Anniversary - for acknowledgements in our newsletter

Hebrew Name- print in block letters using Roman characters - this will be used for Torah honors

Home Phone / Work Phone / Cell Phone / Fax - numbers where we can contact you

E-mail - the e-mail address where we can send you information, notices, and our monthly newsletter.

Additional demographic information to help us understand the make up of the congregation. This information is voluntary and is kept confidential.

Profession

Religion - not all our members are Jewish- we want to be sensitive to everyone's needs, but we need to know the basics. This also impacts our Torah honors policy.

Denomination/Movement - which branch/stream (choose your metaphor) is your background - Reform, Reconstructionist, Conservative, Orthodox, Hassidic, Renewal, Unaffiliated

Gender Identification / Sexual Identification - This helps us understand the make up of the congregation and influences programming.

Preferences

Name disclosure - may we use your name in the newsletters, e-mail bulletins (ATCBM's) and on our web site? Are there any restrictions? For each publication please indicate your preference as **Full** for including your full name, **FNO** for using your first name only, and **NO** for not at all.

Print Only Newsletter - As a major cost saving initiative we send the newsletter to our members via the internet, **unless you tell us that you do not want to get it that way**, and you request that you only receive a printed copy via US mail. We will use the e-mail address(es) you provide on the application. You can request additional e-mail copies be sent to the addresses you list at the bottom of the data sheet.