



# Congregation Beth Israel at the Tri-City Jewish Center

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[www.tricityjewishcenter.org](http://www.tricityjewishcenter.org)

## Membership Application

Date \_\_\_\_\_

Name(s) \_\_\_\_\_

Home Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Marital Status: Single \_\_\_\_\_ Married/Partnered \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_

### Primary Member (or Single Member)

### Spouse/Partner

Name \_\_\_\_\_

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Date of Birth \_\_\_\_\_

Bar/Bat Mitzvah Date \_\_\_\_\_

Religious Affiliation \_\_\_\_\_

Hebrew Name \_\_\_\_\_

Hebrew Name (if Jewish) \_\_\_\_\_

Kohen \_\_\_\_\_ Levi \_\_\_\_\_ Yisrael \_\_\_\_\_

Kohen \_\_\_\_\_ Levi \_\_\_\_\_ Yisrael \_\_\_\_\_

Occupation \_\_\_\_\_

Occupation \_\_\_\_\_

Company Name \_\_\_\_\_

Company Name \_\_\_\_\_

Business Address \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

### Children

Name	Hebrew Name	Gender	Birth date	Grade	Religious School Grade
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

**Yahrzeit**

Name	Relationship	Date/Month/Year	*Hebrew Date
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____

(\*If English month, day and year are listed, we will fill in Hebrew dates)

**Previous Synagogue Affiliation**

Synagogue \_\_\_\_\_ Join Date \_\_\_\_\_  
City \_\_\_\_\_ Resign Date \_\_\_\_\_  
Orthodox \_\_\_\_\_ Conservative \_\_\_\_\_ Reform \_\_\_\_\_ Non-Affiliated \_\_\_\_\_

**Committees (please check those in which you are interested)**

\_\_\_\_\_ Sisterhood                      \_\_\_\_\_ Men's Club                      \_\_\_\_\_ School Board  
\_\_\_\_\_ Budget and Finance                      \_\_\_\_\_ Public Relations                      \_\_\_\_\_ Membership  
\_\_\_\_\_ Building                      \_\_\_\_\_ Special Events                      \_\_\_\_\_ Library/Office  
\_\_\_\_\_ Youth                      \_\_\_\_\_ Usher                      \_\_\_\_\_ Legal and By-Laws

**Volunteer Activities/Interests (please check those in which you are interested)**

\_\_\_\_\_ Labeling/Mailing                      \_\_\_\_\_ Religious Ed. Teacher                      \_\_\_\_\_ Religious Ed. Substitute  
\_\_\_\_\_ Baking                      \_\_\_\_\_ Cooking for Shabbat Dinners                      \_\_\_\_\_ Gift Shop  
\_\_\_\_\_ Lead Services                      \_\_\_\_\_ Chant Torah/Haftarah                      \_\_\_\_\_ Chant Kiddush

**Any other information about you and your family that you would like us to know**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant                      Date

\_\_\_\_\_  
Signature of Applicant                      Date