

Northern Hills Synagogue 5714 Fields Ertel Rd. Cincinnati, OH 45249

fax 513.530.2002 www.nhs-cba.org

nhs-cba@fuse.net

Membership Application

513.931.6038

Adult #1 🛛 Male 🖾 Female	Adult #2 🛛 Male 🗍 Female		
□Mr. □Ms. □Mrs. □Dr. □Rabbi □Other	□Mr. □Ms. □Mrs. □Dr. □Rabbi □Other		
Name:	Name:		
Hebrew Name: Don't know DN/A kohen Dievi	Hebrew Name: □Don't know □N/A □kohen □levi		
Father's Hebrew Name:	Father's Hebrew Name:		
□Don't know □N/A	□Don't know □N/A		
Mother's Hebrew Name: □Don't know □N/A	Mother's Hebrew Name: □Don't know □N/A		
Date of Birth:	Date of Birth:		
Marital Status: Single Married Widowed Dive	orced		
Home Address:	City, State, Zip:		
Home Phone:			
Mobile Phone:	Mobile Phone:		
Email:	Email:		
Occupation:Title:	Occupation:Title:		
Name of Business:	Name of Business:		
Address:	Address:		
Business Phone:	Business Phone:		
Other Information (as applicable):			

Wedding Anniversary	Month:	Day:	Year:
Bar/Bat Mitzvah	Month:	Day:	Year:
Anniversaries			

Children (living at home)

Name	Hebrew Name	Date of Birth	Bar/Bat Mitzvah Date	School & Grade Level	Other Parent/ Guardian's Name & Address if Not Residing w/ Member	Email

Children (away at college or otherwise living on their own)

Name	Hebrew Name	Date of Birth	Address	Email

Yahrzeits (It is our custom to remind congregants of the yahrzeits of their loved ones)

Name (English)	Relationship	Hebrew and English Date of Death, If Known		

Previous Affiliation: (Name, Location of Synagogue, etc.)

When? For how long? ______ Were you active in synagogue/communal life? If so, in what capacity?

If you have any special needs, please tell us here, or let us know by contacting the synagogue office.

Northern Hills Synagogue-Congregation B'nai Avraham welcomes people from many different backgrounds and in many different life situations to its community. In accordance with the standards of Conservative Judaism, some aspects of synagogue membership are reserved for those who are Jewish by maternal descent or by conversion according to traditional Jewish law.

I/We declare that all persons named in this application are Jewish, except as noted.

☐ I/We hereby apply for membership in Northern Hills Synagogue-Congregation B'nai Avraham.

I/We recognize that I/we will be responsible for any dues or debts incurred up to and including the quarter in which the notice is received by the Financial Secretary.

Should I/we resign from membership, a written notice of resignation must be sent to the Financial Secretary of the synagogue.

 Signature
 Date
 Signature
 Date

 Witness
 Date

Being a Part of the Northern Hills-Congregation B'nai Avraham Community

We value and welcome our members' participation in all aspects of synagogue life. We hope that you will find many synagogue activities which fit your needs and interests!

Activities:

Please indicate below the names of household members who may be interested in the listed activities and groups.

Adult		Ad	lult		Ad	ult	
1 2		1	2		1	2	
	Sisterhood			Men's Club			HaZak (55 & over)
	YAKS (Young Adults Kids Sometimes)			Adult Education			Intergenerational Education
	Ritual Committee			Social Action/Gemilut Hasadim			Social Events
	Choir			Fundraising			Membership
	Youth Commission			Keruv (Interfaith families)			Other
	Retired? Please list your previ	ous occi	upation	(s)			

Educational Interests:

Northern Hills Synagogue is a learning congregation and offers educational programs for all interests. Please indicate below areas of interest to you.

Ad	ult		Ad	ult		Ad	ult	
1	2		1	2		1	2	
		Basic Judaism			Beginning Prayerbook Hebrew			Intermediate Prayerbook Hebrew
		Talmud Study			Jewish Values/Ethics			Topical Discussion Groups
		Torah/Haftarah Trope			Adult Bar/Bat Mitzvah			Leading Parts of the Service
		Other			Other			

Ritual Skills:

Is any member of your family interested in leading services? Yes No If yes, indicate name : _____

Northern Hills' services are highly participatory. If you or your children can lead parts of the service, read Torah, chant Haftarah, or lead religious programming for youth, please let us know below.

Names	Parts of the service you can lead including read torah, Haftarah, Shabbat services

Administrative, Programming or Building Skills:

Northern Hills Synagogue depends on and values its volunteers. Your special talents can add so much to our efforts. Please indicate if you would like to share your skills with us in any way.

Adult	-	Adult		Adult	
1 2		1 2		12	
	_ Gift Shop		Graphic Design		Photography
	Office Skills		Publicity/Marketing		Carpentry
	Choir		Social Media		Electrical
	Music		Kitchen/Cooking/Baking		Landscape

If there are other programs or activities which you would like to see at our synagogue, or if you have any other special talents or abilities which we could put to use, please tell us here.

NORTHERN HILLS SYNAGOGUE - CONGREGATION B'NAI AVRAHAM

Membership Categories	Designation	Membership Dues 2014-2015
Under 30 Single		\$ 300
Under 30 Household		\$ 440
30-35 Single		\$ 500
30-35 Household		\$ 900
Full Single		\$ 900
Full Household		\$1650

The Zorndorf Campaign for Tomorrow is Northern Hills Synagogue's mandatory building fund. The minimum pledge is \$1,000 for a family membership, or \$500 for a single member, payable over a five (5) year period.

The Education Endowment Fund was established in 1992 to help fund our Religious School and other educational programs. This fund is voluntary, but the suggested contribution is \$300, payable at once or over three (3) years.

There is no charge to members in good standing for High Holiday admission. Please call the office for admission for college age children. High Holiday tickets for relatives of members visiting from out-of-town are available by request. A donation is appreciated.

A gift first-year membership is presented to couples married by our rabbi and to children of our members the first year they are out of school or are living independently. Information is available from the Membership Chairperson or the synagogue office.

The financial secretary, Laurie Dubin <u>nhsfinsec@fuse.net</u>, sends bills quarterly, in early January, April, July and October. Application for membership should be accompanied by a check for one quarter's dues. A member who joins after the midpoint of a quarter is not responsible for that quarter; an exception is the quarter in which the High Holidays fall. A new member must pay for that quarter. You may choose to pay the remaining balance of your annual dues at any time during the year which helps the synagogue's cash flow.

In case of financial hardship, special dues arrangements may be made by contacting the President, David Bernstein at 513.324.3423 or <u>daveib@fuse.net</u>. Every effort will be made to be fair and all financial information is confidential.

□ I/We understand and agree to the financial commitments associated with becoming a member of NHS-CBA.

- □ I/We understand that dues will be billed on a quarterly basis by the Financial Secretary.
- □ I/We will be responsible for any dues or debts incurred for each quarter in which I/We receive a billing from the Financial Secretary.

If a member wishes to resign, he/she must notify the synagogue in writing. Members are responsible for any financial obligations to the synagogue incurred up to that date.

Please check if you would like your quarterly billing sent electronically via e-mail to: ______

Signature

Date

Signature

Date