

TEMPLE HATIKVAH - HOMESTEAD JEWISH CENTER

PO BOX 924250
HOMESTEAD, FL 33092-4250

Phone 305-248-5724

MEMBERSHIP APPLICATION

In order to update our records please complete the following:

NAME: _____

ADDRESS: _____

HOME TEL#: _____ WORK TEL#: _____

E-MAIL ADDRESS: _____

BEST TIME TO CONTACT YOU: _____

YOUR BIRTHDAY: _____ SPOUSE'S BIRTHDAY: _____

CHILD'S NAME: _____ BIRTHDATE: _____

CHILD'S NAME: _____ BIRTHDATE: _____

CHILD'S NAME: _____ BIRTHDATE: _____

OTHER HOUSEHOLD MEMBER'S NAME: _____ BIRTHDATE: _____

OTHER HOUSEHOLD MEMBER'S NAME: _____ BIRTHDATE: _____

WEDDDING ANNIVERSARY: _____

MAJOR INTERESTS, HOBBIES AND SKILLS: _____

YOUR OCCUPATION: _____ SPOUSE'S OCCUPATION: _____

PARTICIPATION IN OTHER COMMUNAL ORGANIZATIONS AND ACTIVITIES: _____

WOULD YOU BE INTERESTED IN VOLUNTEERING FOR THE TEMPLE: YES _____ NO _____

IN WHAT CAPACITY?: _____

COMMENTS: _____
