



## Membership Form

Date: \_\_\_\_\_

Type of Membership:  Single  Joint  Dual  Rejoining  Absentee  
 Associate Membership (Under Age 38)  Senior Membership (Over Age 38)

### Contact Information: Member 1

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Preferred Phone:  Home  Cell  Work

Email Address: \_\_\_\_\_

I would like to receive Park Synagogue information by email.

### Personal Information (Member 1):

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

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Marital Status:  Single  Married  Widowed  Divorced

Date of Wedding Anniversary(month/day/year): \_\_\_\_\_

### Religious Information (Member 1):

Hebrew Name (in English): \_\_\_\_\_

Father's Hebrew Name: \_\_\_\_\_

Mother's Hebrew Name: \_\_\_\_\_

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

Year of Confirmation: \_\_\_\_\_

Lineage:  Kohen  Levi  Yisrael  Unknown

## Contact Information: Member 2

Prefix: \_\_\_\_\_ First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Preferred First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Ext. \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Preferred Phone:  Home  Cell  Work

Email Address: \_\_\_\_\_

I would like to receive Park Synagogue information by email.

### Personal Information (Member 2):

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

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Marital Status:  Single  Married  Widowed  Divorced

Date of Wedding Anniversary(month/day/year): \_\_\_\_\_

### Religious Information (Member 2):

Hebrew Name (in English): \_\_\_\_\_

Mother's Hebrew Name: \_\_\_\_\_

Father's Hebrew Name: \_\_\_\_\_

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

Year of Confirmation: \_\_\_\_\_

Lineage:  Kohen  Levi  Yisrael  Unknown

## Children

Name\*: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade: \_\_\_\_\_ Gender: \_\_\_\_\_  
Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Single/Married (if adult): \_\_\_\_\_  
Address\*: \_\_\_\_\_

Name\*: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade: \_\_\_\_\_ Gender: \_\_\_\_\_  
Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Single/Married (if adult): \_\_\_\_\_  
Address\*: \_\_\_\_\_

Name\*: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade: \_\_\_\_\_ Gender: \_\_\_\_\_  
Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Single/Married (if adult): \_\_\_\_\_  
Address\*: \_\_\_\_\_

Name\*: \_\_\_\_\_  
School: \_\_\_\_\_  
Grade: \_\_\_\_\_ Gender: \_\_\_\_\_  
Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
Single/Married (if adult): \_\_\_\_\_  
Address\*: \_\_\_\_\_

*\*Include if your child has a different last name and/or address than yours. If your child is an adult, simply list the location of their residence (ex., New York). **Please also note: To include your child(ren) in Bar/Bat Mitzvah scheduling, please email Natalie Prior, [nprior@parksyn.org](mailto:nprior@parksyn.org) to register your child(ren) in our education database.***

Relatives who are Park Members (Name and relationship):

Yahrzeit Information (Deceased immediate family members)

### Member 1 Relatives:

<u>Name of Deceased</u>	<u>Relationship</u>	<u>Date of Death</u>	<u>Hebrew Date (if known)</u>
-------------------------	---------------------	----------------------	-------------------------------

### Member 2 Relatives:

<u>Name of Deceased</u>	<u>Relationship</u>	<u>Date of Death</u>	<u>Hebrew Date (if known)</u>
-------------------------	---------------------	----------------------	-------------------------------

## Programs/Groups at Park Synagogue

We provide our members a wide range of programs and groups for every age group to get involved, meet new people and give back to the community. Please let us know which programs or groups you would like to participate in at Park Synagogue. (See “Park Synagogue Groups and Committees” for more information.)

Member 1 (Check all those that apply):

- Adult Education
- Book Club
- Choir
- Geshher
- Park Family Connection
- Intergenerational Programs
- Keruv Connection
- Men’s Club
- Minyan
- Neshama
- Park Day Camp
- Park Preschool
- Park Synagogue Wolf Religious School
- Senior Adult Activities
- Shabbat Participation
- Sisterhood
- Social Action Projects
- Volunteer Projects
- Women’s Rosh Chodesh
- Young Mensches
- Youth Activities

Other interests:

Member 2 (Check all those that apply):

- Adult Education
- Book Club
- Choir
- Geshher
- Park Family Connection
- Intergenerational Programs
- Keruv Connection
- Men’s Club
- Minyan
- Neshama
- Park Day Camp
- Park Preschool
- Park Synagogue Wolf Religious School
- Senior Adult Activities
- Shabbat Participation
- Sisterhood
- Social Action Projects
- Volunteer Projects
- Women’s Rosh Chodesh
- Young Mensches
- Youth Activities

Other interests:

Comments:

## New Member Questionnaire

*(Please also send in a recent photo of your family with your application)*

Please tell us a little about you and your family (how long you have lived in the Cleveland area, where you grew up, occupations, hobbies and interests of adults and kids):

What made you decide to join Park Synagogue?

What activities/services/events/groups have you been able to experience at Park?

What are your personal or family goals for being a Park member? In what ways will being a Park member make a difference in your life/lives? In what ways do you want to get more involved now or in the future?

## Park Synagogue Building & Maintenance Fee Pledge

All members above the age of 30 are asked to make a pledge to help us defray the costs of maintaining our buildings at Park Synagogue Main and Park Synagogue East. These funds help pay for expenses above and beyond typical operating expenses.

- Couples: One-time pledge of \$1,600, payable over six (6) years for those 35 and over, or over twelve (12) years for those 30-34. Building Fund payments are deferred until age 30 for couples 29 and under.
- Single Members: One-time pledge of \$800, payable over six (6) years for those 35 and over, or over twelve (12) years for those ages 30-34. Building Fund payments are deferred until age 30 for single members 29 and under.
- If a new member agrees to pay the pledge within two (2) years, the obligation is reduced to \$1,300 for couples or \$650 for singles.
- Credit is available, for up to half of our pledge, for confirmed payments made during a prior membership in any synagogue.

Building & Maintenance Fee Assessment: \_\_\_\_\_

Credit for confirmed payment made to another congregation: \_\_\_\_\_

Name of Congregation: \_\_\_\_\_

Building Maintenance Fee Balance Due: \_\_\_\_\_

- Payable (Couples):
- Two-Year Payment Plan (\$650 x 2 years)
  - Six-Year Payment Plan (\$266.66 x 6 years)
  - Twelve-Year Payment Plan – for those age 34 and under (\$133.33 x 12 years)

- Payable (Single):
- Two-Year Payment Plan (\$325 x 2 years)
  - Six-Year Payment Plan (\$133.33 x 6 years)
  - Twelve-Year Payment Plan – for those age 34 and under (\$66.66 x 12 years)

## Dues Information

2022-2023 Membership Dues	
Annual Security Fee	\$150.00
Fund for Conservative Judaism	\$18.00
Discounts:	
<b>TOTAL DUE IN FULL by June 30, 2023</b> (not including Building & Maintenance Fee)	

I/We hereby apply for membership in The Park Synagogue. I/We acknowledge and agree that my membership in The Park Synagogue is subject to the Articles of Incorporation and Constitution of the Synagogue now or hereafter in effect, and to applicable policies, rules, regulations and resolutions now or hereafter approved or adopted by the Synagogue's Board of Trustees. Without limiting the foregoing, and in consideration for services and facilities provided by the Synagogue, and in further consideration for the payments, contributions, pledges and agreements of other members, I/We agree to pay annual membership dues, a Building Maintenance Fund pledge and other applicable fees and charges in the amounts and at the times as determined from time to time by the Synagogue's Board of Trustees or its duly authorized designee. I/We understand that my membership continues until the Synagogue's Executive Director receives my written resignation or my membership is otherwise terminated or suspended pursuant to the Constitution and By-Laws of the Synagogue.

Member 1 Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Member 2 Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please Return:**

**By Mail:** The Park Synagogue  
ATTN: Angela Siegel  
27500 Shaker Boulevard  
Pepper Pike, Ohio 44124

**By Email:** [asiegel@parksyn.org](mailto:asiegel@parksyn.org)

**By FAX:** (216) 321-0639

**To process your application, please also make a payment towards dues by check to Park Synagogue or online at [www.parksynagogue.org](http://www.parksynagogue.org).**

Questions? Contact Angela Siegel at 216-371-2244, ext. 121