



MEMBERSHIP APPLICATION

Temple Shir Shalom of Oviedo
P.O. Box 623182 Oviedo, FL 32762-3182
prayhappy@templeshirshalom.org 407.366.3556
www.templeshirshalom.org

We are delighted that you have chosen to join Temple Shir Shalom. We are a Reform, family oriented, inclusive Jewish congregation founded in December 2001.

Adult #1 Name _____	Adult #2 Name _____
Hebrew Name _____	Hebrew Name _____
Date of Birth ____/____/____ Sex: M/F	Date of Birth ____/____/____ Sex: M/F
Religious Background:	
____ Reform ____ Conservative ____ Orthodox	____ Reform ____ Conservative ____ Orthodox
____ Jew by Choice (date converted _____)	____ Jew by Choice (date converted _____)
____ Not Jewish (affiliation _____)	____ Not Jewish (affiliation _____)
Occupation _____	Occupation _____
Email Address _____	Email Address _____
Cell/Business # _____	Cell/Business # _____

Family Mailing Address:

Address _____
City, State, Zip _____
Phone Number _____

Marital Status

____ Married (date of marriage _____)
____ Single (never married) ____ Divorced
____ Separated ____ Widowed

Please let us know how you learned about TSS: Website:____ Heritage FI Jewish News:____ Orlando Sentinel:____
JCC:____ Jewish Federation:____ Friend (name)____ Other:_____

Dependent Children

Name	Hebrew Name	Birth Date	Present Grade in School	Sex (M/F)
1. _____				
2. _____				
3. _____				
4. _____				

Yahrzeit Information

Please list the names of family members (parents, grandparents, children, siblings) for whom you wish yahrzeit recited. Their name will be memorialized at the Shabbat service prior to the anniversary date according to the Jewish or secular calendar. Feel free to attach a separate sheet if you have more yahrzeits than the space below allows:

Name	Relationship	to whom	Date of Death mm/dd/yr Hebrew/Secular
1. _____			
2. _____			
3. _____			
4. _____			

CONGREGATIONAL INVOLVEMENT/VOLUNTEER

All members are part of the "Temple family". Our Family is a community of volunteers. Family life includes pursuing interests and sharing your talents with others and participating in Temple activities. Our Temple family needs your involvement in order to continue to grow and flourish. Please indicate your areas of interest below.

Please Check all interests:	Adult #1 Name	Adult #2 Name
Community		
Caring Programs (visitation, transportation, meals, etc.)		
Men's Club		
Social Activities (Adult/Family)		
Social Action (Community Involvement)		
Tikkun Olam/Mitzvah Day Planning		
Women's Club		
Yachad Group (Sr. Social)		
Youth Group		
Education		
Adult B'nai Mitzvah		
Adult Education		
B'nai Mitzvah		
Hebrew Tutor		
Religious School		
Growth		
Finance		
Fundraising		
Long Range Planning		
Membership		
Worship		
Adult Choir		
High Holiday Services		
Oneg		
Shabbat Services		
Ushering		
Other - Please Write in (Computer skills, Phone calls, Cook/Bake, etc.)		

A person(s) from the above committees will be contacting you soon. Please provide your Contact Information:

Adult 1 Name _____ **Phone Number** _____

Adult 2 Name _____ **Phone Number** _____

BUILDING FUND INFORMATION

All members are obligated to contribute to our current Temple Building Fund, except Students. The total amount is payable over 4 years: **Family Membership \$1,000 (min. of \$250/year), Single and Senior Memberships \$500 (minimum \$125/year)**. If you join after June 30th, your building fund payment is due by December 31. If you join after Jan. 1st, your yearly contribution is due upon joining the Temple. *No one will be denied Temple membership due to their financial status. To discuss periodic payment arrangements or financial relief, please contact Temple Treasurer, Keith Goldberg at treasurer@templeshirshalom.org.*