

6939 Hoover Road  
Indianapolis, IN 46260  
317-251-6220

# ETZ CHAIM SEPHARDIC CONGREGATION

Committee Approval \_\_\_\_\_

Board Approval \_\_\_\_\_

Check Received \_\_\_\_\_

## Membership Application

Membership Type:     Two Adult     Single Adult

### ADULTS

Name <u>Primary Member</u>			Name <u>Spouse</u>		
First	Middle	Last	First	Middle	Last
Preferred Name _____			Preferred Name _____		
Hebrew Name _____			Hebrew Name _____		
D.O.B. ____ / ____ / ____		Occupation _____	D.O.B. ____ / ____ / ____		Occupation _____
Employer _____			Employer _____		
Work Phone _____			Work Phone _____		
Cell Phone ( ____ ) _____ - _____			Cell Phone ( ____ ) _____ - _____		
Email _____			Email _____		
<u>Emergency Contact</u>			<u>Emergency Contact</u>		
Name _____			Name _____		
Phone _____		Relationship _____	Phone _____		Relationship _____

### Home Address

Street \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Home Fax \_\_\_\_\_

## CHILDREN

**Name**

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

**Preferred Name** \_\_\_\_\_ **Gender** \_\_\_\_\_

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

**D.O.B.** \_\_\_\_\_ **Current Grade** \_\_\_\_\_

**School** \_\_\_\_\_

**Expected Bar/Bat Mitzvah in year** \_\_\_\_\_

**Home Address (if different from member)**

**Street** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Name**

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

**Preferred Name** \_\_\_\_\_ **Gender** \_\_\_\_\_

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

**D.O.B.** \_\_\_\_\_ **Current Grade** \_\_\_\_\_

**School** \_\_\_\_\_

**Expected Bar/Bat Mitzvah in year** \_\_\_\_\_

**Home Address (if different from member)**

**Street** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Name**

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

**Preferred Name** \_\_\_\_\_ **Gender** \_\_\_\_\_

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

**D.O.B.** \_\_\_\_\_ **Current Grade** \_\_\_\_\_

**School** \_\_\_\_\_

**Expected Bar/Bat Mitzvah in year** \_\_\_\_\_

**Home Address (if different from member)**

**Street** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Name**

First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

**Preferred Name** \_\_\_\_\_ **Gender** \_\_\_\_\_

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

**D.O.B.** \_\_\_\_\_ **Current Grade** \_\_\_\_\_

**School** \_\_\_\_\_

**Expected Bar/Bat Mitzvah in year** \_\_\_\_\_

**Home Address (if different from member)**

**Street** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Other Information**

**Adult Member** *(Please check if it applies)*

- Had a Bar/Bat Mitzva
- Went to Hebrew Day School
- Converted *(please attach documentation)*

**Spouse** *(Please check if it applies)*

- Had a Bar/Bat Mitzva
- Went to Hebrew Day School
- Converted *(please attach documentation)*
- Non-Jewish

**Your religious background**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

**Your religious background**

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

**Were you ever a member of *Etz Chaim Sephardic Congregation*?** \_\_\_\_\_

**Were you ever a member of *Etz Chaim Sephardic Congregation*?** \_\_\_\_\_

**How do you prefer your receiving information (e.g. welcoming packet, yahrzeit notifications, etc.)?**

**How do you prefer receiving information (e.g. welcoming packet, yahrzeit notifications, etc.)?**

**Please Circle One:    Print                  Email**

**Please Circle One:    Print                  Email**

*Etz Chaim Sephardic Congregation maintains its membership data for official synagogue use only. Members may choose to be included in the social membership directory which is distributed to congregants only.*

**No use of name or photo**

**No use of name or photo**

**Include in Social Directory?** \_\_\_ Yes \_\_\_ No

**Include in Social Directory?** \_\_\_ Yes \_\_\_ No

**A representative of the membership committee will contact you for a welcoming call. This will be the time to discuss any special questions you have such as:**

- *The place of children in the **Etz Chaim Sephardic Congregation** community*
- *Life cycle events*
- *The role of the Non-Jew in **Etz Chaim Sephardic Congregation***
- *How to get involved in the **Etz Chaim Sephardic Congregation** community*
- *Reduced Membership dues if there is a financial hardship*
- *Any other concerns*

Etz Chaim Sephardic Congregation was founded in 1906 by men and women who were determined to create a **Sephardic presence in Indianapolis** that focused on maintaining Sephardic Halacha (law), customs, and traditions, acts of loving kindness, and, foremost, a belief in the Almighty, G-d of Israel. Etz Chaim continues to hold true to these principles and thrives as an Orthodox Sephardic synagogue. For nearly a century the Kahal has maintained a strong Shabbat program with Erev Shabbat (Friday night) to Sunday morning services, an inviting and warm Oneg Shabbat Kiddush, programs and classes for men and women, along with other youth programming.

Expanding and thriving past its centennial year, Etz Chaim Sephardic Congregation continues to flourish as a light of Sephardic Tradition in Indianapolis.

---

*Signature of Member*

---

*Date*

---

*Signature of Spouse*

---

*Date*

**Please call the office for assistance if you have disabilities that make it difficult to fill out this application. **(317)251-6220****