



WELCOME

ברוכים הבאים



Aventura Turnberry Jewish Center

MEMBERSHIP APPLICATION

We look forward to welcoming you into our synagogue family!

William W. Landa
Chairman of the Board

Rabbi Jonathan E. Berkun

Laurence A. Herrup
President

Cantor David Muchnick

Dr. Amir Baron
Executive Vice President

Melissa Bijou
Membership Director



20400 NE 30th Avenue - Aventura, Florida 33180
Telephone: 305-935-0666 Fax: 305-931-2233 Website: www.atjc.org

Family Information

Office Use Only

Member # _____
 Join Date _____
 Type of Membership _____

Tell us about Yourself

	Member 1	m/f	Member 2	m/f
Name (Mr/Mrs/Dr,etc.)				
Home Address:	City/State/Zip:			
Home Phone			Home Fax	
Cell Phone				
Email Address				
Date of Birth mm/dd/yy				
Marital Status	<input type="checkbox"/> Married <input type="checkbox"/> Single/Divorced <input type="checkbox"/> Widow/Widower <input type="checkbox"/> Life Partners			
Wedding Anniversary If applicable:	mm/dd/yy			
Hebrew Name				
Kohain/Levi/Israelite				
Bar/Bat Mitzvah Date				
Occupation				
Business Name				
Business Phone				
Alternate Address	City/State/Zip:			

Please tell us about your children:

	Child #1	Child #2	Child #3	Child #4
First, Middle & Last Name				
Male/Female				
Hebrew Name				
Birth Date				
Bar/Bat Mitzvah Date				
Name/Grade of School				
Name/Grade Hebrew School/Hebrew High				
Youth Group/Koach				
College Name/Address				
Email address				
Cell Phone				

Yahrtzeit Information

English Name	English Date of Death including Year or Hebrew Date if Known	AM/PM	Relationship
1)			
2)			
3)			
4)			
5)			
6)			

Synagogue Committees of Interest to Join:

Please all that apply:

<input type="checkbox"/>	Adult Bar/Bat Mitzvah	<input type="checkbox"/>	Special Events (Gala)	<input type="checkbox"/>	Religious School	<input type="checkbox"/>	Holocaust Survivors
<input type="checkbox"/>	Adult Education	<input type="checkbox"/>	Hazak (Senior)	<input type="checkbox"/>	Ritual	<input type="checkbox"/>	School
<input type="checkbox"/>	Bereavement	<input type="checkbox"/>	High Holy Days	<input type="checkbox"/>	Shabbat Greeters	<input type="checkbox"/>	Theatre Club
<input type="checkbox"/>	Bikkur Cholim	<input type="checkbox"/>	Israel	<input type="checkbox"/>	Single Parents	<input type="checkbox"/>	Tikkun Olam
<input type="checkbox"/>	Building & Grounds	<input type="checkbox"/>	Keruv (Outreach)	<input type="checkbox"/>	Singles	<input type="checkbox"/>	Ushering
<input type="checkbox"/>	Finance	<input type="checkbox"/>	Membership	<input type="checkbox"/>	Sisterhood	<input type="checkbox"/>	Young Couples
<input type="checkbox"/>	Fundraising	<input type="checkbox"/>	Men's Club	<input type="checkbox"/>	Social Action	<input type="checkbox"/>	Young Professionals

Other _____

Heritage Society: (Planned Giving)

_____ I am interested in joining the Heritage Society and thus ensuring Jewish Continuity.

Membership Dues Categories:

_____ Double Chai \$3,600 - All Inclusive: Four High Holiday Tickets, Name on Synagogue Membership Chai Wall, Two Tickets to Annual Gala and Private Speaker's Luncheon, Membership to Brotherhood and/or Sisterhood

_____ Family \$1,800 _____ Young Family (32 & under) \$1350 _____ Seasonal Family \$1000

_____ Single \$1000 _____ Young Single (36 & under) \$360 _____ Seasonal Single \$550

_____ I am applying for Reduced Dues Consideration.

_____ Enclosed, please find my check in the amount of \$ _____

_____ Enclosed, please find an additional donation in the amount of \$ _____

In honor of: _____ *In memory of:* _____

_____ Please charge my credit card in the amount of \$ _____

Account # _____ Expiration Date: _____

_____ I authorize _____ I do not authorize my personal information to be listed in ATJC's Membership Directory.

Relationship to Aventura Turnberry Member(s)? _____

Religious Tradition in which you were raised? *Orthodox, Conservative, Reform*

Are you currently a member of another congregation? Yes No

Name: _____

Areas of Jewish Expertise? _____

Civic/Cultural Affiliations? _____

Others residing in your home and their relationship? _____

Disabilities or special needs? _____

How did you learn about Aventura Turnberry Jewish Center?

What motivated you to join?

Please list any others you think would be interested in joining ATJC.

The undersigned hereby applies for membership and agrees to abide by the constitution and bylaws of the Aventura Turnberry Jewish Center. The undersigned agrees to pay all application sums and annual dues.

Date _____ Signature _____

Welcome to the Family

