

**Princeton Reconstructionist Synagogue:  
a String of Pearls**

601 Ewing St., Suite A-11, Princeton, NJ 08540



**Membership Form: 2017-18**  
*Welcome!*

Please Complete the form and return it with your payment to the above address. Thank you!

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone(s) \_\_\_\_\_

E-mail(s) \_\_\_\_\_

Child's name \_\_\_\_\_ Birthday \_\_\_\_\_

Child's name \_\_\_\_\_ Birthday \_\_\_\_\_

Child's name \_\_\_\_\_ Birthday \_\_\_\_\_

*Life Cycle Events*

Name: \_\_\_\_\_ Birthday: \_\_\_\_\_ Name: \_\_\_\_\_ Birthday: \_\_\_\_\_

Hebrew name: \_\_\_\_\_ Hebrew name: \_\_\_\_\_

Child's Hebrew Name: \_\_\_\_\_

Child's Hebrew Name: \_\_\_\_\_

Child's Hebrew Name: \_\_\_\_\_

Wedding Anniversary: \_\_\_\_\_

*Yahrzeits*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Date (English or Hebrew): \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Date (English or Hebrew): \_\_\_\_\_

*Talents and Connections in Your Household*

(Please include first name or initials so we know whom to contact.)

Do you have any talents or hobbies that you could share with the congregation, *e.g.* musical, culinary, artistic, or \_\_\_\_\_?

Do you have any professional skills that you could share with the congregation, *e.g.* legal, educational or financial?

Please list any local non-profits you are involved with that could use our help with tzedakah:

*Areas of Interest in Jewish Learning*

Please circle or initial any of the following areas of interest; feel free to add your own.

Talmud      Torah      Hebrew decoding      the Prayer Book      chanting Torah/ Haftarah  
singing the liturgy      learning Hebrew songs      learning a little Yiddish      Jewish cookery  
book group      travel talk      social action      g'milut chasadim

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**Payment of Dues and Donations**

Enclosed is my check for \$ \_\_\_\_\_ to be applied toward:

\_\_\_ Family dues (\$1,000)      \_\_\_ Single dues (\$500)      \_\_\_ Donation (\$ \_\_\_\_\_) for \_\_\_\_\_

**PAYMENT OPTIONS:** I will make four equal payments of \$ \_\_\_\_\_ by:  
September 1<sup>st</sup>, December 1<sup>st</sup>, February 1<sup>st</sup> and May 1<sup>st</sup>, **or** pay according to the following schedule:

\_\_\_\_ I am unable to pay dues in full at this time and agree to both:

1. Contact **Joan Sanchez**, Princeton Reconstructionist Synagogue Treasurer at 732 667-3060 **on or before September 15, 2017 to discuss my payment plan and options** *and* to
2. Communicate regularly with her. I understand that all information is confidential and that *no one is ever turned away for financial reasons.*