

# WELCOME TO B'NAI TORAH CONGREGATION

## OUR VISION

B'nai Torah shall serve all Jews who come to our community and seek an egalitarian, multi-generational, Conservative congregation in which to increase their knowledge, practice and faith. To fulfill this vision, B'nai Torah will perpetuate Torah through diverse programs of worship, learning, tzedakah, and social activities. B'nai Torah's professional and support staff will strive to assist our membership create and maintain an active and vibrant congregation, servicing the needs and fulfilling the dreams of all who seek us out.

**Mirochnick Religious School** - Offers educationally enriching instruction for grades Kindergarten-12th.  
**Tuition for Students Entering School in September, 2010:**

	<u>Before 6/1/10</u>	<u>After 6/1/10</u>
Kgn & 1st grades	\$615	\$650
2nd - 5th grades	\$835	\$885
6th & 7th grades	\$785	\$835
8th & 9th grades	\$530	\$580
10th grade	\$730	\$780
11th & 12th grades	n/a	\$300/member \$350/non-member

**Bar/Bat Mitzvah:** Please contact our Bar/Bat Mitzvah Coordinator to reserve a date.

**Ruth & Edward Taubman Early Childhood Center:** For tuition information, please contact Nancy Goldstein, Director at 561-750-9665 and ask about our special membership commitment rates for ECC families.



**B'nai Torah Congregation of Boca Raton, Inc.**  
 6261 SW 18th Street - Boca Raton, FL 33433  
 Phone 561.392.8566 - Fax 561.362.0990  
 Religious School 561.392.8566  
 Early Childhood 561.750.9665  
 Youth Hotline 561.392.9600  
 www.bnai-torah.org



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 6261 SW 18th Street - Boca Raton, FL 33433  
 Phone 561 392 8566 - Fax 561 362 0990  
 www.bnai-torah.org - Elissa.schosheim@bnai-torah.org

## Membership Information Request Form

### ADULT 1

First Name (Dr.\Mr.\Mrs.\Ms.): \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Nick Name: \_\_\_\_\_ Date of Birth: mm \_\_\_ /dd\_\_\_ /yyyy\_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_  
 Summer Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_  
 Approximate date leaving Florida: \_\_\_\_\_ Approximate date arriving in Florida: \_\_\_\_\_  
 Home Phone: ( ) \_\_\_\_\_ Summer Phone: ( ) \_\_\_\_\_  
 Home Email: \_\_\_\_\_ Mobile Phone: ( ) \_\_\_\_\_  
 Business Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_ Business Email: \_\_\_\_\_  
 Business Phone: ( ) \_\_\_\_\_ Business Fax: ( ) \_\_\_\_\_  
 Gender: M / F Community \_\_\_\_\_ Anniversary: mm \_\_\_ /dd\_\_\_ /yyyy\_\_\_\_\_  
 Relatives in the Congregation: Please list names and relationship to you \_\_\_\_\_  
 \_\_\_\_\_  
 Hebrew Name: \_\_\_\_\_ Tribe: (circle one) Cohen / Levi / Israelite  
 (Please use English Letters) Bar/Bat Mitzvah Date: \_\_\_ /\_\_\_ /\_\_\_\_\_

### ADULT 2

First Name (Dr.\Mr.\Mrs.\Ms.): \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Nick Name: \_\_\_\_\_ Date of Birth: mm \_\_\_ /dd\_\_\_ /yyyy\_\_\_\_\_  
 Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_  
 Summer Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_  
 Approximate date leaving Florida: \_\_\_\_\_ Approximate date arriving in Florida: \_\_\_\_\_  
 Home Phone: ( ) \_\_\_\_\_ Summer Phone: ( ) \_\_\_\_\_  
 Home Email: \_\_\_\_\_ Mobile Phone: ( ) \_\_\_\_\_  
 Business Name: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_ Zip \_\_\_\_\_ Business Email: \_\_\_\_\_  
 Business Phone: ( ) \_\_\_\_\_ Business Fax: ( ) \_\_\_\_\_  
 Gender: M / F Community \_\_\_\_\_ Anniversary: mm \_\_\_ /dd\_\_\_ /yyyy\_\_\_\_\_  
 Relatives in the Congregation: Please list names and relationship to you \_\_\_\_\_  
 \_\_\_\_\_  
 Hebrew Name: \_\_\_\_\_ Tribe: (circle one) Cohen / Levi / Israelite  
 (Please use English Letters) Bar/Bat Mitzvah Date: \_\_\_ /\_\_\_ /\_\_\_\_\_

**Was first applicant's mother Jewish?** \_\_\_ Yes \_\_\_ No

**Was second applicant's mother Jewish?** \_\_\_ Yes \_\_\_ No

*If either applicant converted to Judaism, please indicate date and place of conversion* \_\_\_\_\_

**PLEASE INDICATE EACH CHILD'S INFORMATION BELOW**

**CHILD under 23 years old**

Name: \_\_\_\_\_ School: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Gender: M / F Current School Grade: \_\_\_\_\_  
 Date of Birth: mm \_\_\_ /dd \_\_\_ /yyyy \_\_\_\_\_  
 Bar/Bat Mitzvah Date: \_\_\_ / \_\_\_ / \_\_\_\_\_  
 Hebrew Name: \_\_\_\_\_  
 (Please use English letters)

**Emergency Contact**  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

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**CHILD under 23 years old**

Name: \_\_\_\_\_ School: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Gender: M / F Current School Grade: \_\_\_\_\_  
 Date of Birth: mm \_\_\_ /dd \_\_\_ /yyyy \_\_\_\_\_  
 Bar/Bat Mitzvah Date: \_\_\_ / \_\_\_ / \_\_\_\_\_  
 Hebrew Name: \_\_\_\_\_  
 (Please use English letters)

**Emergency Contact**  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

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**CHILD under 23 years old**

Name: \_\_\_\_\_ School: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
 Gender: M / F Current School Grade: \_\_\_\_\_  
 Date of Birth: mm \_\_\_ /dd \_\_\_ /yyyy \_\_\_\_\_  
 Bar/Bat Mitzvah Date: \_\_\_ / \_\_\_ / \_\_\_\_\_  
 Hebrew Name: \_\_\_\_\_  
 (Please use English letters)

**Emergency Contact**  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

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**CHILD under 23 years old**

Name: \_\_\_\_\_ School: \_\_\_\_\_  
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 Date of Birth: mm \_\_\_ /dd \_\_\_ /yyyy \_\_\_\_\_  
 Bar/Bat Mitzvah Date: \_\_\_ / \_\_\_ / \_\_\_\_\_  
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 (Please use English letters)

**Emergency Contact**  
 Name: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Relationship: \_\_\_\_\_

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How did you hear about B'nai Torah? \_\_Relative \_\_Friend \_\_Newspaper \_\_Website \_\_\_\_\_ Other

Why are you joining B'nai Torah? \_\_Rabbis \_\_Cantors \_\_Services \_\_Programming \_\_Adult Ed \_\_Holidays

\_\_Mirochnick Religious School \_\_Taubman Early Childhood \_\_Youth Dept. \_\_Concert Series \_\_\_\_\_ Other

**B'NAI TORAH DUES SCHEDULE 2010/2011**

Please indicate your membership category. Year-round members are entitled to HHD tickets (2 per Family/1 per Single Membership).

Membership Category	Dues	Security & Maintenance Assessment	Capital Fund (Payable for 6 years)
<b>PLATINUM CHAI</b>			
<input type="checkbox"/> Platinum Chai Family	\$10,000	\$100	\$600/yr x 6yrs
<input type="checkbox"/> Platinum Single	\$5,000	\$50	\$300/yr x 6yrs
<b>GOLDEN CHAI</b>			
<input type="checkbox"/> Golden Chai Family	\$4,250	\$100	\$600/yr x 6yrs
<input type="checkbox"/> Golden Single	\$2,125	\$50	\$300/yr x 6yrs
<b>SILVER CHAI</b>			
<input type="checkbox"/> Silver Chai Family	\$2,500	\$100	\$600/yr x 6yrs
<input type="checkbox"/> Silver Single	\$1,250	\$50	\$300/yr x 6yrs
<b>FAMILY</b>			
<input type="checkbox"/> Family	\$1,700	\$100	\$600/yr x 6yrs
<input type="checkbox"/> Young Family	\$960	\$100	\$600/yr x 6yrs
<input type="checkbox"/> Young Married	\$36	\$100	\$600/yr x 6yrs
<i>Older Spouse 36 to 40 as of July 1, 2010</i>			
New Member <u>Introductory Rate</u> first year only. See below for continuing Membership rates.			
<input type="checkbox"/> Young Married	\$360	\$100	\$600/yr x 6 yrs
<i>Older Spouse 35 or Under as of July 1, 2010</i>			
<input type="checkbox"/> Young Married	\$360	\$100	\$600/yr x 6 yrs
Continuing			
<i>Older Spouse 35 or Under as of July 1, 2010</i>			
<b>Special rates are available for families in the Ruth and Edward Taubman Early Childhood Center</b>			
<b>SINGLE (Age as of July 1, 2010)</b>			
<input type="checkbox"/> Single 41+	\$795	\$50	\$300/yr x 6yrs
<input type="checkbox"/> Single 36 to 40	\$500	\$50	\$300/yr x 6yrs
<input type="checkbox"/> Young Single 36 or under	\$180	\$50	\$300/yr x 6yrs
<b>SEASONAL MEMBERS</b>			
<input type="checkbox"/> Platinum Chai Family	\$7,200	\$100	
<input type="checkbox"/> Platinum Single	\$3,600	\$50	
<input type="checkbox"/> Golden Chai Family	\$2,850	\$100	
<input type="checkbox"/> Golden Single	\$1,600	\$50	
<input type="checkbox"/> Silver Chai Family	\$1,625	\$100	
<input type="checkbox"/> Silver Single	\$825	\$50	
<b>The categories listed below receive No HHD Tickets, No Capital Fund, Voting Rights with 3 consecutive years of Membership</b>			
<input type="checkbox"/> Patron	\$1,250	\$100	
<input type="checkbox"/> Family	\$775	\$100	
<input type="checkbox"/> Single	\$450	\$50	

I/we submit this application because I/we wish to be member(s) of B'nai Torah Congregation of Boca Raton, Inc. and in consideration of being accepted, I/we hereby agree to abide by, and acknowledge the ability to obtain and view the Constitution and Rules of Administration of B'nai Torah Congregation of Boca Raton, Inc. These can be accessed on our Web site, www.bnai-torah.org under the submenu Board of Trustees. If I/we don't have internet access I/we can request a written copy by calling the Synagogue office.

I/we agree and understand that the fiscal year for membership begins on July 1 and that B'nai Torah Congregation relies on my/our dues and program fees for support. I/we agree to pay all charges to our account when due. I/we also understand should I/we resign our membership after I/we have received my/our High Holy Days tickets (regular members) that we will not be entitled to any membership refund, or rebate whatsoever.

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

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