

APPLICATION FOR MEMBERSHIP  
in the  
JEWISH GENERAL AID ASSOCIATION  
CONGREGATION TIFERETH ISRAEL  
Landfield Avenue Synagogue  
18 Landfield Avenue  
Monticello, New York 12701

QUESTIONS TO BE ANSWERED BY THE APPLICANT  
(See back for dues fee structure)

DATE: \_\_\_\_\_

1. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone \_\_\_\_\_  
Occupation \_\_\_\_\_ Business \_\_\_\_\_  
Email address \_\_\_\_\_
2. State place and date of birth  
City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_  
Born on \_\_\_\_\_ Day of \_\_\_\_\_ Year \_\_\_\_\_
3. Are both your parents of the Jewish faith? \_\_\_\_\_  
State their Hebrew names, (mother) \_\_\_\_\_ (father) \_\_\_\_\_
4. Are you married? \_\_\_\_\_ If so, state the name and age of the wife  
Name (English) \_\_\_\_\_ (Hebrew) \_\_\_\_\_ Age \_\_\_\_\_  
Date of birth \_\_\_\_\_ Is she of Jewish faith? \_\_\_\_\_  
Are both her parents of Jewish faith? \_\_\_\_\_  
Give their Hebrew names, (mother) \_\_\_\_\_ (father) \_\_\_\_\_
5. State your Hebrew name \_\_\_\_\_
6. Wedding Anniversary? \_\_\_\_\_ (see back for children's names)
7. Have you ever applied for membership here before? \_\_\_\_\_  
If so, what was the disposition of that application? \_\_\_\_\_
8. Will you uphold the Constitution and By Laws of the Jewish General Aid Association? \_
9. Are you (and your spouse) in good health? Yes \_\_\_\_\_ No \_\_\_\_\_  
If not, please advise as to any condition \_\_\_\_\_
10. Were there any conversions or adoptions in your family? \_\_\_\_\_  
If yes, please explain \_\_\_\_\_  
(Please note: All conversions must meet the standards of the Orthodox Rabbinical Council.)
11. Do you want cemetery benefits? Yes \_\_\_\_\_ No \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Approved by: \_\_\_\_\_

\_\_\_\_\_

Write names and birthdays of children:

English

Hebrew

DOB

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Please provide a contact person, if we are unable to contact you:

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

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

#### Dues Fee Structure

Family Membership Per Year \$700.00

Single Membership (Widow, Widower) \$350.00

Please call our office for additional information if you are interested in cemetery privileges.

(Rev. 12/2017)