

Congregation Zohar Yisrael Membership Form

Personal Information

Full Name :	
Hebrew Name :	
Are you Jewish? :	
Birth Date :	
Full Address :	
ity/State/Zip Code :	
Married :	Yes/No
Name of Spouse :	
your spouse Jewish? :	Yes/No
Gender :	(Male/Female)
Email :	
Phone Number :	
none Number of spouse	



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Personal Information Continued - Children

Name/Age/Hebrew Name:	
Name/Age/Hebrew Name:	

Terms & Conditions of Synagogue Membership

Membership is not automatic but a monthly fee of 10.00 dollars or a 120.00 fee for a yearly membership should be sent via our Zelle or PayPal: **chavurahzoharyisraelus@gmail.com.** The fee is used for synagogue expenses. If the fee is not sent then the individual will no longer be a synagogue member.

Membership does not confer halakhic status. If you are interested in conversion or return, please contact the rabbi.