



CONGREGATION

Shir Shalom

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Sonoma, CA 95476
707-935-3636

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www.shir-shalom.org

Adult #1 Last, First Name
Adult #2 Last, First Name

New Membership Application **Renewal Membership Update**

(Information you furnish will be kept confidential and is only intended for our records. You may fill in only the fields you wish, but the more information you can provide, the better Congregation Shir Shalom can meet your needs. Please add an additional sheet as needed.)

Adult #1 Name _____ Hebrew Name _____

Residence Address _____ Do not publish street address in directory

Email _____ Home Phone _____ Cell _____ Fax _____

Occupation _____ Company Name _____ Date of Birth _____
 - If retired please specify previous occupation (Year Optional)

If you have minor children, please complete data for both parents regardless of the membership you choose.

Adult #2 Name _____ Hebrew Name _____

Residence Address _____ Do not publish street address in directory

Email _____ Home Phone _____ Cell _____ Fax _____

Occupation _____ Company Name _____ Date of Birth _____
 - If retired please specify previous occupation (Year Optional)

Status Married Partnered Single Widowed Divorced Separated

Anniversary/Partnership Date _____

If you are related to any other members of Shir Shalom, please give name(s) and relationship _____

Children (Under 22)

First, Middle, Last Name	Hebrew Name	M/F	Birth Date	School Name & Grade	Interests, Talents, Skills or Special Needs

Previous family religious education? _____

Senior Citizen Parents Living in the Community

First, Last Name	Hebrew Name	Relationship	Address	Age (Optional)	Special Needs

Adult Children

If you have adult or young adult children living in the community who are not affiliated with Congregation Shir Shalom and you would like them to receive our newsletter and other synagogue information, please provide the following information

Name(s)	Address	Phone	Email	Age	Children's Names & Ages

List of Departed for Yarzeit Records

Name	Relationship	Date of Death (MM/DD/YYYY)	Member's Name

New Members Only:

Current/previous synagogue affiliation _____ City/State _____ When? _____

Have you been active in synagogue life? _____ In what capacity? _____

Are you or any members of your family former Congregation Shir Shalom members? _____ When? _____

What brings you to Congregation Shir Shalom? _____

Programs

We encourage all members of our congregation to take an active role in synagogue life. We would very much like you to select one or more areas in which you or your family might have an interest. While all these activities may not be currently offered, your input will help us plan our programming:

- Families with Young Children Adult Education Social Programs Religious School Hebrew Study
- Spiritual Learning & Practice Senior Programs Teen Programs Book Group Interfaith Programs
- Community Service/Tikkun Olam Family Activities & Outings Adult Singles Programs Shabbat & Holiday Programs
- Adult B'nei Mitzvah Circles of 8 with First Congregational Church Torah Study Social Action Singing Circle
- Men's Club Sisterhood Films/Theater/Jewish Culture Jewish Food/Dining Group Ritual Music
- Other activities that would interest you and your family: _____
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Volunteering

Our congregation thrives only through the dedication and active participation of our members and their families. We encourage the participation of individuals and family groups. Please indicate in which of the following areas you would be interested in volunteering or offering assistance. If you can't volunteer for a committee or long term activity, please volunteer for a specific event. We are a community that is as strong as its member involvement.

- Membership Office Support Fundraising Community Outreach Development/Strategic Planning
- Newsletter Publicity/PR Technology/Website High Holy Days Religious School Senior Activities
- Adult Education Worship/Rituals/Religious Services Family Shabbats Oneg Shabbat/Kiddush Finance
- Cultural Activities Assist Congregants w/Transportation to Services/Events Culinary Skills Volunteer Coordination
- Gemilut Chasadim (Caring Committee) Create a Judaica Shop or Website Musical Assistance
- Children's Activities Professional Services (Pro Bono) Teen Programs Artistic or Graphic Design Assistance

Other synagogue committees or activities for which you would like to volunteer: _____

Please tell us anything else about you or your family's interests, skills, talents, beliefs, concerns or needs so that we can do our best to welcome & embrace you, involve you & meet the needs of you & your family.

I understand that by my membership in Congregation Shir Shalom I am entering into a sacred covenant to make a commitment to participate in, learn from, share talents & blessings with, advocate on behalf of, volunteer for & give back to Congregation Shir Shalom & the Sonoma Valley Jewish community to the best of my talents, resources & abilities. I will make my needs & concerns known to the congregation, its leadership & its clergy & by doing so help the congregation meet my needs & those of the Sonoma Valley Jewish community. I understand no one is ever turned away due to financial circumstance.

Signature(s) _____

Thank you for choosing to be a part of the Congregation Shir Shalom family.