

114 McBrien Road Chattanooga, TN 37411 Phone: (423) 894-8900 Fax: (423) 894-8902 email: shul@bzcongregation.com http://www.bnaizioncongregation.com

MEMBER BENEFITS

- **★** Warm and welcoming community
- ★ Access to all religious & social synagogue events including High Holiday services
- * Religious School enrollment
- **★** Bar/Bat Mitzvah preparation
- Lifelong Learning opportunities
- All life cycle events
- Cemetery privileges
- * Rabbinic counseling
- **★** Complimentary babysitting Shabbat morning and holidays
- Vote at membership meetings
- * Eligible to hold synagogue office and be a board member
- ★ Receive all synagogue mailings
- **★** Benefits of United Synagogue Membership

B'nai Zion is proud of its history and looks forward to helping new members become an integral part of our warm and welcoming synagogue family. We strongly encourage and appreciate the active participation of new members.

In which of the following areas would you like to participate?

☐ Sisterhood	□ Engagement
☐ Men's Club	☐ Cemetery
☐ Kadima/United Synagogue Youth	□ Chevra Kaddisha/Shmirah
□ Volunteer in Office	□ Ritual
☐ Help Cook/Bake	☐ Education
☐ Social Action	☐ Archives
Other	

Skills to offer:

☐ Chant Torah	☐ Marketing
☐ Chant Haftarah	☐ Tech Support
☐ Lead services	☐ Building & Grounds
☐ Teach in Religious School	☐ Fundraising
☐ Teach adults (indicate subject):	☐ Programming
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□ Other	

B'NAI ZION MEMBERSHIP DUES STRUCTURE

Upon submission of your application you will be contacted by a member of B'nai Zion's Membership Committee to discuss your annual membership dues. We do this to help our new members feel comfortable with their level of support to our synagogue and to review with you all the benefits that membership and being a member of our lewish community provides.

MEMBERSHIP DUES ARE BASED ON THE FOLLOWING:

- 1. General Membership Levels:
 - One or more Jewish family members 34 years or older
 - All Jewish family members 33* years or younger
 - A Jewish single 34 years or older
 - A Jewish single 33 years or younger
- 2. Dual Membership: 50% of applicable general membership fee
- **3.** Non-Resident Membership**: 50% of applicable general membership fee
- **4. Contributing Membership*****: Minimum annual contribution of \$260

*The under 33 discount applies if all Jewish members of household are under 33 on July 1 of the Synagogue Year.

**Eligible if every adult Jewish member of household (over 17 years of age) lives more than 100 miles from Chattanooga.

***Contributing Membership grants no Member privileges except identification with B'nai Zion and receiving synagogue publications.

5. High Holiday Tickets (non-members): \$80/Single - \$105/Family

MEMBERSHIP APPLICATION

Applicant		
Full Name:		
Full Hebrew Name:ben/bat		
Birth Date, including year: □ Cohen □ Levi □ Yisra'el		
Cell phone:		
E-mail address:		
Employer:Work Phone:		
Home Address:		
City/State/Zip:		
Home Phone:		
Spouse/Partner		
Full Name:		
Full Hebrew Name:ben/bat		
Birth Date, including year:		
□ Cohen □ Levi □ Yisra'el □ Non-Jewish		
Cell phone:		
E-mail address:		
Employer:Work Phone:		
Wedding Anniversary, including year:		
Children Living at Home		
Children Living at Home		
Name:		
Hebrew Name:		
Gender: □M □F Birth Date, including year:		
Name:		
Hebrew Name:		
Gender: □M □F Birth Date, including year:		
Name:		
Hebrew Name:		
Gender: □M □F Birth Date, including year:		
Name:		
Hebrew Name:		
Gender: □M □F Birth Date, including year:		

Adult Children Living Away From Home			
Name:			
Spouse's Name:			
Name:			
Spouse's Name:			
Name:			
Spouse's Name:			
Name:			
Spouse's Name:			
	V-1		
Yahrzeits *We can calculate the yahrzeit from the civil date of death. Please provide year of death. Indicate if death occurred after sundown by checking the box in the date field.			
English Name	Hebrew Name	Yahrzeit Date*	
Membership Agreement			
If elected to membership, I agree to abide by all the Rules, Regulations, Constitution, and Bylaws of the Congregation, and I agree to pay the current annual dues of \$			
I hereby enclose \$ □ Check # □ Credit Card			
I wish to pay my dues on ☐ Monthly ☐ Quar ☐ Bill me. ☐ Automatic	terly 🗆 Semi-Annually	□ Annually	
Signature:		Date:	