Congregation Ahavas Torah

2935 Onyx St. Eugene, OR 97403

Tel: 541.844.1340 www.ahavastorah.info ahavastoraheugene@aol.com



Rabbi David Zitter
rabbizitter@ahavastorah.info
Charles Marpet, President

Membership Form 5784 (2024)

Personal Information			
Name(s):			
Hebrew name(s):			
Address:			
Contact Information and preference			
Home:			
Work:			
Email:			
Membership Information I/We wish to apply for membership at this level: □ Family \$1200 (annually) □ Seniors 60+ \$720 (annually)			
☐ Single \$600			
☐ Single Senior 60+ \$360			
Unique bellior of 1 \$500			
<u>Out of Town Membership</u> □ \$36 + \$			
I/We would like to pay: \square monthly \square annually			
I/We would like to make an additional pledge:			
\$720 \$540 \$380 \$180 Other \$			
Total Enclosed:			
Please Note: For those who cannot afford the basic membership, 50 annual volunteer work hours at the synagogue are offered as an alternative. Please advise us as to days and time that you are available.			

No membership will be denied for lack of funds.

No committee appearance or proof of income required.

A Jewish Community Welcoming All!

MEMBER INFORMATION

Please fill this part of the form in order to assist the gabbai in designating aliyot. You may have completed a similar form in the past. Please use this form to help us update our records.

Member:

Last, First Name (English): _		
	DOB:	
Hebrew Name:		
□ Kohen □ Levi □	Israel	
Bar/Bat mitzvah Parsha:		
Father's Hebrew Name:		_ ben
(his father's name):		
Yahrzeit Date:		
Mother's Hebrew Name:		bat
(her father's name):		
Yahrzeit Date:	Year	
Yahrzeit Date:	ouse:	
Last, First Name (English): _		
Last, First Name (English): _	DOB:	
Hebrew Name:		
□ Kohen □ Levi	□ Israel	
Bar/Bat mitzvah Parsha:		
Father's Hebrew Name:		_ben
(his father's name):		
Yahrzeit Date:		
Mother's Hebrew Name:		_bat
(her father's name)		
Yahrzeit Date:		_
Children – (use ba	ick of form as needed)	
Name:		
Hebrew Name:		
Date of birth:	Yahrzeit Date:	
Name:		
Hebrew Name:		
Date of birth:	Yahrzeit Date:	
Name:		
Hebrew Name:		
Date of birth:	Yahrzeit Date:	