



Kehillas HaGra

Membership Application

Date _____ Full Name _____

Full Hebrew Name _____ בן _____ Cohen Levi Yisroel

Name of wife _____ Wife's Full Hebrew Name _____ בת _____

Address _____

Phone # _____ Mobile # _____

E-mail address _____ Wife's E-mail address _____

Learning: Full time at _____ Part time at _____

Occupation/Profession _____ Working Retired

Wife's Occupation/Profession _____ Working Retired

Previous Community _____

Date moved to RBS _____

CHILDREN

Name	Grade	School	Date of Birth
1) _____	_____	_____	_____
2) _____	_____	_____	_____
3) _____	_____	_____	_____
4) _____	_____	_____	_____
5) _____	_____	_____	_____
6) _____	_____	_____	_____
7) _____	_____	_____	_____
8) _____	_____	_____	_____

YORTZEITS

Name (e.g Moshe Ben Chaim)	Date	Relationship (e.g. father/ in law/ grandparent)
1) _____	_____	_____
2) _____	_____	_____
3) _____	_____	_____
4) _____	_____	_____
5) _____	_____	_____
6) _____	_____	_____

COMMUNITY SERVICE

Please list any Jewish, civic, or professional organizations you are involved with and your position:

I and/or my spouse are able to volunteer for (check your preferences):

- | | | |
|--|---|--|
| <input type="checkbox"/> Building Maintenance Help | <input type="checkbox"/> Chesed Committee | <input type="checkbox"/> Hospitality Committee |
| <input type="checkbox"/> Kiddush Preparation | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Office Assistance |
| <input type="checkbox"/> Phone Squad Committee | <input type="checkbox"/> Family Programming | <input type="checkbox"/> Teen Activities/Programming |
| <input type="checkbox"/> Children's Activities/Programming | <input type="checkbox"/> Women's Programs | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Graphic Design /websites | <input type="checkbox"/> Photography/Video | <input type="checkbox"/> Other _____ |

MEMBERSHIP CATEGORIES

NOTE: Members that sign the Building Fund Pledge, (which can be paid in installments over the years) receive a fixed seat in the Shul. Please speak to R' Karpes for details.

- *Full Membership *including fixed seat* : 230 nis / month, plus Building Fund pledge.
- Membership / Regular attendee to Shiurim: 230 nis/month

PAYMENT OPTIONS

Please make out Shekel checks to **מוסדות הגר"א**

Thank you

- I enclose _____ checks, of _____ ₪/\$ each (please circle)
 - I enclose _____ ₪/ \$ cash. (please circle)
 - I am paying with Bank transfer / הוראת קבע.
- I agree to pay _____ ש"ח per month, and realize as a member of Kehillas HaGra, I am obligated to abide by the Shul מנהגים.
- Signature _____

All Members receive:

- *Regular עליות and other כיבודים.
- *Discounts for seats for Yomim Noroim.
- *Private consultations with the Rav.
- *Priority to daven before the עמוד for חייבים.
- *Invitations to Shul events.