



**MEMBERSHIP RENEWAL FORM 2010-2011**

**Members' Names:**

\_\_\_\_\_ & \_\_\_\_\_  
 First Last First Last

Name of non-Jewish Spouse if applicable: \_\_\_\_\_

Check if you do not consent to using pictures of your family at CBT-BI events for our publicity materials

I want to join Men's Club [Please enclose a separate check for \$50 payable to CBT-BI Men's Club]

I want to join Sisterhood [Please enclose a separate check for \$36 payable to CBT-BI Sisterhood]

I/We would like to join the Parent Teacher Organization [Please enclose a separate check for \$15 per family, payable to CBT-BI PTO]

**You may enter all the information below or only corrections and additions to personal information on file:**

Hebrew Name: \_\_\_\_\_ ben/bat \_\_\_\_\_ v' \_\_\_\_\_  
 yours father's mother's

Spouse's

Hebrew Name: \_\_\_\_\_ ben/bat \_\_\_\_\_ v' \_\_\_\_\_  
 yours father's mother's

When calling me to the Torah (Check one):

Use only my father's Hebrew name  Use both parents' Hebrew names

When calling me (spouse) to the Torah (check one):

Use only my father's Hebrew name  Use both parents' Hebrew names

Mailing Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Spouse's Cell Phone #: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_ Spouse's E-Mail Address: \_\_\_\_\_

Include email address in membership lists  Include email address in membership lists

Include email in CBT-BI fliers  Include email in CBT-BI fliers

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Spouse Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

**Please list information for children in college or younger children NOT attending Hebrew School below:** (List status as: preschooler, Midrashah student, BBYO eligible (grades 9-12), College student)

1. Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Status: \_\_\_\_\_
2. Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Status: \_\_\_\_\_

**If you have lost a loved one in the past year, please contact Harold Aronovitch at haronovitch@hotmail.com or (856) 589-1635 to ensure that our Yahrtzeit list is up to date.**

Please list other information the temple should be aware of or other changes including additional non-Hebrew school children on the back if needed.

**Mail All Forms and Checks to:**

**Debbi Ret, PO Box 313, Landisville, NJ 08326 (Former CBT Members)**

**Stu Gerstein, 31 Creek Lane, Mount Royal, NJ 08061 (Former BI Members)**