



OR EMET
 MINNESOTA CONGREGATION
 FOR HUMANISTIC JUDAISM

Please complete this form and make checks payable to: OR EMET

**Send form and check to:
 Sharon Miller, 4316 Aries Court, Eagan, MN, 55123 or call 651-905-1979**

We welcome suggestions. Please submit them with your payment.

MEMBERSHIP FORM 2018-19

Date:			
Adult(s) Names:			
Child(ren)s' Names	Date of Birth	Will Attend JCS?*	
		Yes	No

Address: _____

Phone: _____	Email: _____
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Membership/Tuition (September 2018 - August 2019):

Individual membership	<input type="checkbox"/> \$330	<input type="checkbox"/> Four payments of \$82.50
Family membership, no children	<input type="checkbox"/> \$480	<input type="checkbox"/> Four payments of \$120
College age student	<input type="checkbox"/> \$100	<input type="checkbox"/> Four payments of \$25
Family membership with one child in JCS	<input type="checkbox"/> \$650	<input type="checkbox"/> Four payments of \$162.50
Each additional child	<input type="checkbox"/> \$110	<input type="checkbox"/> Four payments of \$27.50
<input type="checkbox"/> <i>Chai</i> for Refreshments (Optional)	<input type="checkbox"/> \$18	
Additional Contribution (Optional)	<input type="checkbox"/> \$ _____	
Total amount:	\$ _____	*Four payments of: \$ _____

*If you choose the quarterly option, send the first payment check with this form, and you will receive a quarterly reminder email

If you would like to become more involved in congregational activities, check this box and we will contact you!



Membership Directory Information

For New (or unlisted) Members Only

Or Emet's directory helps members connect more easily! Directory listings are for congregational and personal use only (no solicitations). **If you are not already in the directory**, and would like to be included in it, please complete and return this form with your Membership Form. Only the information you put on this form will be made available to your fellow members.

**** Note: Members already in the directory will be contacted in the coming months via email for updates of their information, and should not use this form. ****

First and last name(s):

Child(ren)'s first and last name(s), and age(s) as of January 1, 2019:

Street address: _____

City, state, ZIP code: _____

Area code-phone number: _____

E-mail address(es): _____

Family/personal Web address: _____

Pet(s) [name(s), type(s)]: _____

Other information you would like to share in 100 words or fewer (hobbies, interests, family activities, recipes, philosophies, quotes, favorite books, upcoming celebrations, etc.)
