

Congregation Kol Ami
A Conservative Congregation
Affiliated with the United Synagogue of Conservative Judaism
 3919 Moran Road, Tampa, Florida 33618
 813-962-6338

B'ruchim Habaim: Welcome to Congregation Kol Ami

MEMBERSHIP APPLICATION FORM

We are delighted that you are interested in Congregation Kol Ami. Please take a moment to get to know us by reviewing the information contained in this membership application packet. It is our hope that new members will feel welcomed, at home, and a part of our congregational family. If there is anything in this application that you have questions about or are not sure how to answer, just let us know and/or fill it out the best you can. Thank you for taking the time to complete the application.

(Please print or type)

Date Prepared: _____ How did you hear about us?: _____

Name(s) of Adult Applicant(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Home phone: _____ Home fax: _____

	FIRST ADULT	SECOND ADULT
Full Name(First, Middle, Last)		
Title (Mr., Ms., Mrs., Dr., Other)		
Hebrew Name		
Gender (Male/Female)		
Date of Birth - month/date/year		
E-mail Address		
Occupation or Profession		
Employer and/or Business		
Business Phone		
Cell Phone		
Current Marital Status		
If Married - month/date/year		

Past or Present Synagogue Affiliation (name and address) (Please indicate if Orthodox, Conservative, Reconstructionist, or Reform), if any		
Primary Congregational affiliation (if membership is Associate)		
Parents' Names (please include full names, and city/state where they live)		
If you have relatives at Kol Ami, please list names/relationship.		

CHILDREN If you have children, please provide the following as it applies to each of your children. (If needed, please attach additional pages with same information for additional children and/or Grandchildren.)

	Child 1	Child 2	Child 3	Child 4
Full Name (first, middle, last)				
Hebrew name				
Gender (M/F)				
Date of Birth				
Address (if different from yours)				
Marital status, or n/a				
Will your child attend Kol Ami Religious School?				
Will your child attend Hebrew Day School?				
If previously has had Bar/Bat Mitzvah Ceremony, please enter date/place				
If currently attending post-high school education, enter name of school				

Reminder: It is our policy to never turn away a member because of inability to pay standard dues.

Thank you for completing this application. Shalom.