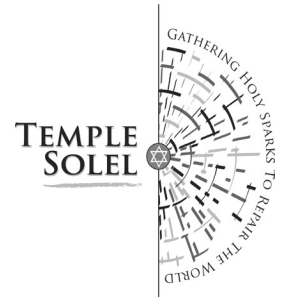


# "BARUCH HA BA"—WELCOME TO TEMPLE SOLEL!

*We are delighted you have chosen to join our congregation!*

*Please tell us how you heard about Temple Solel:* \_\_\_\_\_

We invite you to complete this application and information form so that we may encourage your full participation in the life of the Temple Solel community. The data you share with us remains completely confidential. This information helps us to establish an accurate profile of our membership in order to plan more effectively to serve your needs. Thank you for your cooperation!



*(Please Print Legibly)*

Membership Category \_\_\_\_\_ Date \_\_\_\_\_

## Member A

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name (Dr./Mr./Mrs./Ms.) Middle Name

\_\_\_\_\_  
Hebrew Name

## Member B

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name (Dr./Mr./Mrs./Ms.) Middle Name

\_\_\_\_\_  
Hebrew Name

## Member A - Home Information

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Residence Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

## Member B - Home Information

\_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Residence Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

## Personal Data - Member A

Marital Status:  
 Married  Single  Domestic Partner  Widowed  Divorced

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

If a Temple member needs blood, may we call you?  Yes  No

Wedding Anniversary Date \_\_\_\_/\_\_\_\_/\_\_\_\_

## Personal Data - Member B

Marital Status:  
 Married  Single  Domestic Partner  Widowed  Divorced

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

If a Temple member needs blood, may we call you?  Yes  No

## Your Household

Name(s) of children living at home:

1. \_\_\_\_\_  
First Middle Last Hebrew Name Male/Female Birth Date Current School Grade

What school does your child currently attend?

2. \_\_\_\_\_  
First Middle Last Hebrew Name Male/Female Birth Date Current School Grade

What school does your child currently attend?

3. \_\_\_\_\_  
First Middle Last Hebrew Name Male/Female Birth Date Current School Grade

What school does your child currently attend?

4. \_\_\_\_\_  
First Middle Last Hebrew Name Male/Female Birth Date Current School Grade

What school does your child currently attend?

Name(s) of children living away from home:

1. \_\_\_\_\_ Age \_\_\_\_\_  
 Married  Single  Domestic Partner  Widowed  Divorced \_\_\_\_\_  
Address, City, State, Zip and Phone

2. \_\_\_\_\_ Age \_\_\_\_\_  
 Married  Single  Domestic Partner  Widowed  Divorced \_\_\_\_\_  
Address, City, State, Zip and Phone

3. \_\_\_\_\_ Age \_\_\_\_\_  
 Married  Single  Domestic Partner  Widowed  Divorced \_\_\_\_\_  
Address, City, State, Zip and Phone

4. \_\_\_\_\_ Age \_\_\_\_\_  
 Married  Single  Domestic Partner  Widowed  Divorced \_\_\_\_\_  
Address, City, State, Zip and Phone

Name(s) of other adults living at home

Relationship

Special needs we can help with

1. \_\_\_\_\_

2. \_\_\_\_\_

### Photo Release

- I do give permission for my family or family member's photo to be used for press releases or other promotional literature.
- I do not give permission for my family or family member's photo to be used for press releases or other promotional literature.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Professional Information

### Member A

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Company Address

(\_\_\_\_\_) \_\_\_\_\_  
Business Phone

(\_\_\_\_\_) \_\_\_\_\_  
Business Fax

\_\_\_\_\_  
Business Email

### Member B

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Company Address

(\_\_\_\_\_) \_\_\_\_\_  
Business Phone

(\_\_\_\_\_) \_\_\_\_\_  
Business Fax

\_\_\_\_\_  
Business Email

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## Jewish Organizational Involvement

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### Jewish Data

#### Member A

Religious tradition in which you were raised

- Reform  Reconstructionist  
 Conservative  Secular, non-practicing  
 Orthodox  None

If not raised in a Jewish tradition, are you

- Jewish by Choice - Date of Conversion \_\_\_\_\_  
 Other Denomination \_\_\_\_\_

"NFTY" or other Youth Group involvement? \_\_\_\_\_  
\_\_\_\_\_

Previous Synagogue Affiliation \_\_\_\_\_

Year you left \_\_\_\_\_.

Did you have any outstanding financial obligation?  Yes  No

Officer, board, committee member \_\_\_\_\_

- Do you read Hebrew?  Yes  No  
Prayer Book?  Yes  No  
Fluent?  Yes  No  
Speak Hebrew?  Yes  No  
Chant Torah?  Yes  No

#### Member B

Religious tradition in which you were raised

- Reform  Reconstructionist  
 Conservative  Secular, non-practicing  
 Orthodox  None

If not raised in a Jewish tradition, are you

- Jewish by Choice - Date of Conversion \_\_\_\_\_  
 Other Denomination \_\_\_\_\_

"NFTY" or other Youth Group involvement? \_\_\_\_\_  
\_\_\_\_\_

Previous Synagogue Affiliation \_\_\_\_\_

Year you left \_\_\_\_\_.

Did you have any outstanding financial obligation?  Yes  No

Officer, board, committee member \_\_\_\_\_

- Do you read Hebrew?  Yes  No  
Prayer Book?  Yes  No  
Fluent?  Yes  No  
Speak Hebrew?  Yes  No  
Chant Torah?  Yes  No

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### Yahrzeit Information

Names of those immediate family members (Father, Mother, Brother, Sister, Husband, Wife, Son, Daughter) who have died and for whom you wish Yahrzeit recited will be memorialized at Shabbat services closest to the anniversary of their death according to either the Hebrew or English calendar. You will be notified by mail and please feel free to call if you have a question or special request. You may purchase a Yahrzeit plaque in memory of your loved one(s) through the Temple office. If you would like the Rabbi/Temple Office to be aware of any information or special instructions regarding your death/burial, please enclose the information in a sealed envelope. We will keep it in your confidential file. The complete date (month, day and year) is required for each Yahrzeit entry.

Name	Member	Relationship	Hebrew - Month, Day and Year	English - Month, Day and Year
_____	<input type="checkbox"/> A <input type="checkbox"/> B	_____	_____	_____
_____	<input type="checkbox"/> A <input type="checkbox"/> B	_____	_____	_____
_____	<input type="checkbox"/> A <input type="checkbox"/> B	_____	_____	_____
_____	<input type="checkbox"/> A <input type="checkbox"/> B	_____	_____	_____

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### Cemetery Information

I/We  have or  have not made arrangements at a cemetery. Location \_\_\_\_\_.

If there is information or instructions regarding your death and/or burial that you would like the Rabbi and/or Temple office to be aware of, please enclose this information in a sealed envelope. This will be kept in your file unless otherwise requested.

## Congregational Involvement - Member A

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Residence Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

## Congregational Involvement - Member B

Last Name \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Residence Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

**We are always interested in involving our members in the life and activities of the Congregation.  
Below are a list of congregational areas of interest, involvement and activities. Please place a check beside any that interest you.**

- Adult Education: Plans programs and classes to further Jewish knowledge
- ARZA/World Union Committee: Distributes information on current events affecting Israel
- Brotherhood: Social and mitzvot opportunities
- Budget and Finance: Oversees temple financial matters
- By-Laws/Legal: Advises Temple Board of all legal matters
- Choir: Sings at selected services throughout the year
- Early Childhood Center: Supports Preschool programming, fundraising and family events
- Etanu: Maintains contact with our college students
- Event Planning: Organizes fundraising social events
- Gift Shop: Volunteer Sales People
- Havdalah Nights: Social Group of ages 45+
- Havurot: Friendship groups for families
- Hineynu: Supportive services such as hospital and home visitation, meals or transportation to members in need
- House and Grounds: Building and property maintenance
- Israel Action Committee: Promotes interest in Israel
- Jewish LGBT: Supports J☆Pride of San Diego
- Leadership Development: Board leadership training
- Library: Assists librarians
- Long Range Planning: Plans for future Temple operations
- Membership: Welcomes and helps integrate new members
- Religious Practices: Directs ritual observances and music for the congregation
- Religious School: Supports Religious School policies and programs
- Security: Oversees security of Temple grounds and congregation
- Sisterhood: Social and educational events
- Social Action: Organizes social justice, mitzvot and tzedakah projects
- Technology: Evaluates technology needs for Temple Solel
- Youth Groups: Social and social action activities for students in grades 5–12

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# Why Should I Join a Havurah?

**Community!**

**Fun!**

**Friendship!**

★ Our synagogue's havurah program is an incredible opportunity to connect with other congregants with similar interests to form an extended Temple Solel family.

★ Through the havurah, members get to know each other outside of the synagogue while building lasting relationships within the synagogue.

**Please fill out the form below to get started today!**

*(Please print clearly)*

**FAMILY MEMBER A**

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

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

**FAMILY MEMBER B**

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

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_

**ADDRESS**

Street \_\_\_\_\_ City \_\_\_\_\_ ZIP \_\_\_\_\_

**CHILDREN**

Name	M/F	Birth Year	Still at Home?
_____			
_____			
_____			

Are the ages of the other members or children important to you? \_\_\_\_\_

How far are you willing to travel? \_\_\_\_\_

Are there other members you wish to join in the same havurah? \_\_\_\_\_

**For questions, please contact Judy Bricker at 760.436.0654 x254 or [jbricker@templesolel.net](mailto:jbricker@templesolel.net)**



**What is a Havurah?**

The word havurah is the Hebrew word for fellowship or friendship. A havurah is a small group of temple members—singles, couples, and families—who gather to learn, socialize and enjoy Jewish life together. We help you launch the havurah, and then it is self-directed.

**What does a Havurah do?**

Each havurah decides as a group together on its goals for Jewish learning through programs of study, observance, socializing and sharing of simchas. Members of the havurah personalize and vitalize their Jewish experience and participate together in temple life and community concerns.

**Why should I belong to a Havurah?**

The havurah program is designed to bring together groups of congregants with similar interests who might otherwise not have an opportunity to meet. It is a chance for members to get to know each other outside the synagogue, while building lasting relationships within the synagogue. It is a way to make our large congregation feel smaller.

**How do I join a Havurah?**

Complete the information form on the reverse side and return it to the temple office. New havurot are formed based on age, children, and other meaningful factors. You will be placed in a havurah as soon as there is an opening in one that matches your needs. If there are enough similarly minded members interested in creating a new havurah, you will begin together in a new havurah.

**Community!**

**Fun!**

**Friendship!**