CONGREGATION SONS OF ZION 378 MAPLE STREET HOLYOKE, MA 01040 (413)534-3369

office@sonsofzionholyoke.org



RABBI SAUL PERLMUTTER

2023-2024 Membership Form

Adult Member	Adult Member		
Name	Name		
Preferred Title First Middle Last	Preferred Title First Middle Last		
Preferred Name	Preferred Name		
Hebrew Name	Hebrew Name		
Parent's Hebrew Name (If Known)	Parent's Hebrew Name (If Known)		
Preferred Pronoun (Optional)	Preferred Pronoun (Optional)		
DOB	DOB		
Home Phone	Home Phone		
Cell Phone	Cell Phone		
Email	Email		
Emergency Contact	Emergency Contact		
Emergency Contact Relationship	Emergency Contact Relationship		
Emergency Contact Phone Number	Emergency Contact Phone Number		
Home A	Address		
Street	Street		
CityZip Code	CityZip Code		
Adult Member	Adult Member		
☐ Jewish	☐ Jewish		
□ Non-Jewish	□ Non-Jewish		
Please provide information for any yahrzeits you would like to observe (Name, Relationship, Date of Birth, Date of Death):	Please provide information for any yahrzeits you would like to observe (Name, Relationship, Date of Birth, Date of Death):		

Children

Name	Name	Name		
First Middle Last	First Middle	Last		
Preferred Name	Preferred Name			
Hebrew Name				
Preferred Pronoun (Optional)	Preferred Pronoun (Optional)			
DOB	DOB			
Current Grade				
School				
Expected Bar/Bat Mitzvah Year		Expected Bar/Bat Mitzvah Year		
Name	Name	Name		
First Middle Last	First Middle	Last		
Preferred Name	Preferred Name			
Hebrew Name	Hebrew Name	Hebrew Name		
Preferred Pronoun (Optional)	Preferred Pronoun (Optional)			
DOB	DOB			
Current Grade	Current Grade	Current Grade		
School				
Expected Bar/Bat Mitzvah Year	Expected Bar/Bat Mitzvah Year			
We would love to know more about yourself and you hobbies? Do you sing, cook, garden, enjoy photograph like to learn? Are there other talents/areas of interest	y? Can you read Hebrew, chant Torah, or le	ad services? Would you		