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

office@sonsofzionholyoke.org



RABBI SAUL PERLMUTTER

2022-2023 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	
Ноте	Address	
Street	Street	
Zip 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		
First Middle Last	First Middle	Last	
Preferred Name	Preferred Name		
Hebrew Name	Hebrew Name		
Preferred Pronoun (Optional)	Preferred Pronoun (Optional)		
DOB	_ DOB		
Current Grade	Current Grade		
School			
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	