

**Temple Shalom, Home of the New Jewish Congregation**  
13563 County Rd. 101 Oxford, Florida 34484 (352) 748-1800

**New or Renewal Part Time Membership Form 2011 – Part 1**

**Last Name/First Name**                      **Nick Name (If Preferred)**                      **Birthday (mm/dd)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Wedding Anniversary (mm/dd)** \_\_\_\_\_

**Florida Address**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Community Name \_\_\_\_\_ Section \_\_\_\_\_

**Other Address**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_

**E-Mail** - Please **PRINT** clearly (for example, abcdef@comcast.net)

E-Mail for \_\_\_\_\_ E-Mail Address \_\_\_\_\_

E-Mail for \_\_\_\_\_ E-Mail Address \_\_\_\_\_

**Interests:** May we call upon you for committee participation? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Please indicate your past occupations, hobbies and interests

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe previous participation in other temple organizations or committees:**

\_\_\_\_\_  
\_\_\_\_\_

**Yahrzeits (Print clearly – If renewing, only changes or additions necessary)**

Loved One's Name	Relationship To Congregant	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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**New or Renewal Part Time Membership Form 2011 - Part 2**

<b>Last Name</b>	<b>First Name</b>	<b>Phone No.</b>
_____	_____	_____
_____	_____	_____
Florida Address _____		
City _____	State _____	Zip _____

**Membership Dues**

Please submit full payment with this application. No charge for dependents under the age of 21 living in the same household.

- **Membership Dues:**  
*Per Person* \$150 - January 1 through December 31, 2011

**Building Fund - This section must be completed**  
 The building fund requirement is \$625 per person and is payable as follows:

- 1. Full Payment Option Plan** - \$625 per person due with 2011 annual dues.
- 2. Payout Option Plans**  
 Check one of the following \_\_\_ 3 years \_\_\_ 2 years  
 See table below to determine your annual payment amount.  
  
 \*First year's payment due with 2011 annual dues. Select month for remaining building fund annual payments. (Not to exceed 12 months from first payment).  
  
 \_\_\_ Jan \_\_\_ Feb \_\_\_ Mar \_\_\_ Apr \_\_\_ May \_\_\_ June \_\_\_ July \_\_\_ Aug \_\_\_ Sep \_\_\_ Oct \_\_\_ Nov \_\_\_ Dec

<b>Year</b>	<b>3 year plan</b>	<b>2 year plan</b>
2011*	\$209 per person	\$312.50 per person
2012	\$208 per person	\$312.50 per person
2013	\$208 per person	

**Dues Amount X number of individuals joining..... \$ \_\_\_\_\_**  
**Building Fund Amount Per above Payout Option Plan..... \$ \_\_\_\_\_**  
**Total Amount Submitted..... \$ \_\_\_\_\_**  
 Check No. \_\_\_\_\_ Date \_\_\_\_\_