

## GSJC MEMBERSHIP FORM

Gishrei Shalom Jewish Congregation  
(860) 276-9113 • 37 Main St • Southington CT 06489 • gsjc.org

Welcome to the GSJC community. We look forward to getting to know you. Please leave a message at our office (860) 276-9113 if you have any questions. Thank you.

Please clearly print the information requested and highlight any information you do not want published in the Membership Directory.

Please check appropriate dues level:

- Chai \$1800
- Mitzvah \$1200
- Full Family \$1066
- Single Parent Family- \$852
- Single Person (there must be only 1 person in the family) \$811
- Separate Family (both parents are members) \$533
- Affiliated Member (must be a member of another URJ congregation) ½ of your membership level

Please mail your check and membership form to **GSJC, PO Box 777, Southington, CT 06489**

Please contact [treasurer@gsjc.org](mailto:treasurer@gsjc.org) if you would like to pay via paypal giving. Thank you.

VOLUNTEERS ARE ALWAYS APPRECIATED. Please check what interests you.

- |   |  |
|---|--|
| <input type="checkbox"/> Adult Education    | <input type="checkbox"/> Religious Education |
| <input type="checkbox"/> Annual Picnic      | <input type="checkbox"/> Ritual              |
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Sanctuary Setup     |
| <input type="checkbox"/> Finance            | <input type="checkbox"/> Sisterhood          |
| <input type="checkbox"/> Holiday Programs   | <input type="checkbox"/> Social Justice      |
| <input type="checkbox"/> Lay Lead Service   | <input type="checkbox"/> Sunshine            |
| <input type="checkbox"/> Men's Club         | <input type="checkbox"/> Ways & Means        |
| <input type="checkbox"/> New Membership     | <input type="checkbox"/> Other _____         |
| <input type="checkbox"/> Oneg               | <input type="checkbox"/> Other _____         |

## GSJC MEMBERSHIP FORM

Adult #1

Adult #2

First Name		
Last Name		
Hebrew Name (if known)		
Title		
Cell Phone		
Email		
Home Phone		
Preferred method of contact		
Father's Hebrew Name		
Mother's Hebrew Name		
Mailing address		<input type="checkbox"/> same as adult
Emergency contact (Name, relationship and phone number)		

