



# Agudath Israel of the Five Towns

במ"ד

מקדש צבי יחיאל

Cedarhurst - Woodmere

508 Peninsula Boulevard

516-374-5364

*Yitzchok D. Frankel, Rav*

516-374-5364

## Membership Application

Last Name: \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Husband's Email Address \_\_\_\_\_ Wife's Email Address \_\_\_\_\_

Select One:  Kohen  Levi  Yisrael Bar Mitzvah Parsha? \_\_\_\_\_

	Member	Member Spouse
Hebrew Name		
Name You Go By (If Different)		
Father's Hebrew Name		
Mother's Hebrew Name		
Occupation		
Work Phone		

	Child's Hebrew Name	Name Child Goes By	Age
1)			
2)			
3)			
4)			
5)			
6)			

Hebrew Wedding Anniversary: \_\_\_\_\_

Please list yarzeit's and relationship to family member:

We can help out with:

Dinner Committee

Baal Tefilah

Youth Department

Membership Committee

Finance Committee

N'Shei

Membership includes two seats for the Yomim Noraim. Please submit this form with payment, or contact us at [membership@agudah5t.org](mailto:membership@agudah5t.org) to make other payment arrangements. You may also pay using Zelle to [payments@agudah5t.org](mailto:payments@agudah5t.org) or on our website <http://www.agudah5t.org> with your PayPal account.

Name \_\_\_\_\_ Date \_\_\_\_\_