

CONGREGATION OHR MOSHE

170-16 73RD AVENUE HILLCREST, NY 11366

WEB SITE

[HTTP:// MYSITE.VERIZON.NET/OHRMOSHE](http://mysite.verizon.net/OHRMOSHE)

ASHER SCHECHTER, RABBI

ASHERSCHECHTER@VERIZON.NET OR 591-4888

E-MAIL - CONGOHRMOSHE@YAHOO.COM

TEL: 718 591 4888

MOSHE BERKOWITZ, GABBAI

MURRAY.BERKOWITZ@DP.AIL.COM OR 591-7894

COME ONE – COME ALL !

FRIENDS & NEIGHBORS.

TOO OFTEN WE TAKE THINGS FOR GRANTED, BUT, LIGHTS, AIR CONDITIONING & HEATING ARE EXPECTED TO BE ON, PREMISES NEED TO BE CLEANED; INSURANCE NEEDS TO BE IN PLACE AND ROOFS NEED REPAIR.

WE INVITE YOU TO JOIN OUR KEHILA BY BECOMING A MEMBER OF OUR SHUL, TO SUPPORT OUR ACTIVITIES AND THE WORK AND SERVICES WE PROVIDE.

WE HAVE TWO LEVELS OF MEMBERSHIPS,

FULL MEMBERSHIP IS INTENDED FOR THOSE FAMILIES AND INDIVIDUALS WHO MAKE OUR SHUL THEIR PRIMARY AFFILIATION. - ANNUAL COST IS \$250.00.

ASSOCIATE MEMBERSHIP IS INTENDED FOR THOSE FAMILIES AND INDIVIDUALS THAT ARE AFFILIATED WITH OTHER SHULS AND KEHILOT, BUT WHO, WOULD LIKE TO SUPPORT ADDITIONAL WORTHWHILE INSTITUTIONS.

WHILE WE ENCOURAGE ALL TO BECOME FULL MEMBERS IN ADDITION TO MEMBERSHIPS IN OTHER SHULS, WE UNDERSTAND THAT TO MANY - ASSOCIATE MEMBERSHIP WILL BE THE MORE APPROPRIATE CHOICE.

THE COST FOR AN ASSOCIATE MEMBERSHIP IS \$136.00 PER YEAR. (*LESS THAN A CUP OF COFFEE PER DAY*)

MEMBERSHIP ENTITLES YOU TO DISCOUNTS ON HIGH HOLIDAY SEATS, PURCHASES OF PLAQUES (MEMORIAL & GOLD LEAF) RENTAL OF SHUL FACILITIES FOR SIMCHAS, AND TWO FREE SPONSORSHIPS OF SHABBOS AFTERNOON SHIURIM (IN MEMORY OR IN HONOR OF A PERSON OR OCCASION OF YOUR CHOICE)

IT WILL ALSO ENTITLE YOU TO THE SCHAR MITZVAH ASSOCIATED WITH SUPPORTING A CENTER OF TEFILLA, TORAH, AND MAASIM TOVIM.

SOME OF YOU HAVE ALREADY JOINED AND ATTEND OUR SHIURIM, COME IN TO DAVEN IN OUR MINYANIM.

PLEASE BE HERE FOR US SO THAT WE MAY BE THERE FOR YOU!

SEE MEMBERSHIP DETAILS ON BACK OF THE FORM

LOOKING FORWARD TO HEARING FROM YOU,

RABBI ASHER SCHECHTER
CONGREGATION OHR MOSHE

COMMENTS, SUGGESTIONS AND COMPLAINTS OR COMPLIMENTS – PLEASE ADDRESS VIA RETURN E-MAIL. RESPONSES TO CONGOHRMOSHE@YAHOO.COM WILL BE PICKED UP AND PROCESSED ACCORDINGLY.



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MEMBERSHIP APPLICATION FORM			
FAMILY NAME:			
ADDRESS 1			
ADDRESS 2			
ADDRESS 3			
TELEPHONE		E-MAIL	
INDIVIDUAL / HEAD OF HOUSEHOLD	ENGLISH		
	HEBREW		
SPOUSE	ENGLISH		
	HEBREW		
OFFSPRING	ENGLISH		
	HEBREW		
	ENGLISH		
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HEBREW			

PLEASE COMPLETE / UPDATE INFORMATION ON BOTH SIDES AND TURN IN TO THE SHUL – THANK YOU

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MEMBERSHIP APPLICATION FORM				
FAMILY NAME:				
Yahrtzeit, Memorial Shiur Information	ENGLISH			
	RELATION			
	HEBREW			
	DATE HEBREW	DATE ENGLISH		
	ENGLISH			
	RELATION			
	HEBREW			
	DATE HEBREW	DATE ENGLISH		
	ENGLISH			
	RELATION			
	HEBREW			
	DATE HEBREW	DATE ENGLISH		
	ENGLISH			
	RELATION			
	HEBREW			
	DATE HEBREW	DATE ENGLISH		
INFORMATION & PRIVACY STATEMENT (CHECK OFF YOUR SELECTION)	ANY INFORMATION PROVIDED BY YOU WILL BE MADE AVAILABLE AND PUBLISHED ON THE SHUL'S MEMBERSHIP LIST IN STRICT ADHERENCE TO YOUR INSTRUCTIONS AS CHECKED OFF BELOW. ANY INFORMATION RELEASED BY YOU <u>WILL NOT BE USED FOR ANY OTHER PURPOSE OTHER THAN SHUL COMMUNICATIONS.</u> FURTHERMORE, THE FOLLOWING WILL APPEAR ON THE LIST: " IT IS FORBIDDEN TO DISSEMINATE THIS LIST TO ANYONE NOT MENTIONED ON THE LIST "			
	<input type="checkbox"/> LIST FULL NAME, ADDRESS, TELEPHONE & E-MAIL ADDRESS.			
	<input type="checkbox"/> I WOULD LIKE TO JOIN THE SHUL'S E-MAIL LIST (GROUP)			
	<input type="checkbox"/> LIST FULL NAME, ADDRESS ONLY.			
	<input type="checkbox"/> LIST FULL NAME ONLY.			
	<input type="checkbox"/> DO NOT PUBLISH OR RELEASE MY NAME.			
	FAMILY / FULL MEMBERSHIP \$250.00	ASSOCIATE FAMILY MEMBERSHIP \$136.00		

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