



**CONGREGATION
B'NAI TIKVAH**

1558 WILMOT ROAD
DEERFIELD, IL 60015
847/945-0470
FAX 847/945-0706
info@bnaitikvah.net
www.bnaitikvah.net

CONGREGATION B'NAI TIKVAH

OUR HISTORY - OUR HOPE

In the summer of 1976 twenty young Deerfield families, seeking to form a close-knit Jewish community, to find spiritual expression for themselves and a Jewish education for their children, founded Congregation B'nai Tikvah, *Children of Hope*.

This tri-part aspiration reflected our people's ancient understanding of such an institution: namely, a *bet tefillah*, a house of prayer; a *bet midrash*, a house of study; and a *bet kneset*, a house of assembly.

OUR GROWTH

Over the years, our Congregation has gained an enviable reputation for excellence in each of these sacred strivings. Our Shabbat, Festival and weekday family services are characterized by a warm spirituality and an informal dignity, celebrated by exuberant congregational participation.

EDUCATION: OUR YOUTH

Our Religious School, offering programs from kindergarten through high school, has been acknowledged as among the most progressive and effective in the Chicago metropolitan community. The B'nai Tikvah/Board of Jewish Education Early Childhood Center program has earned universal acclaim, and our innovative BarlBat Mitzvah program has earned a nationwide reputation for its excellence.

Our youth enjoy exciting activities and fellowship within our USY, Kadima and Makor programs. Our post B'nai Mitzvah students serve as Junior Tutors in our BarlBat Mitzvah programs and participate fully in our religious services.

ADULTS: EDUCATION AND FELLOWSHIP

Congregation B'nai Tikvah's award-winning Continuing Jewish Education Program offers a wide range of courses for individual or group learning as well as a number of guest speakers through a series of scholarin-residence programs.

Reflecting the diversity of our activities, Congregation B'nai Tikvah prides itself in the exciting programming of our Sisterhood as well as the Chavurah programs of our young families, single adults, empty nesters and seniors.

OUR B'NI TIKVAH FAMILY

Whether for religious services, study or fellowship, our gatherings reflect the warmth and joy of a true congregational family. This welcoming spirit is palpable from the moment one enters our administrative offices and our beautiful Synagogue lobby. We welcome you.



CONGREGATION
B'NAI TIKVAH
1558 WILMOT ROAD
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MEMBERSHIP APPLICATION

Please check one:
(see Fee Schedule for definition)
 Full Family Membership
 Single Family Membership
 Junior Family Membership
 Single Membership
 Junior Single Membership
 Senior Family Membership
 Senior Single Membership
 Chaverim

FAMILY NAME _____

DATE _____

ADDRESS _____

CITY _____ ZIP _____ PHONE _____

MARITAL STATUS: Single _____ Married _____ Divorced _____ Widowed _____ Date Married _____

MEMBER

FULL NAME (Mr., Dr., Ms., etc.) _____

BIRTHDATE _____

JEWISH BY _____ Birth _____ Traditional _____ Not Jewish
Conversion

CELL PHONE _____

E-MAIL PERSONAL _____

HEBREW NAME _____

(Transliterate; include father's & mother's Hebrew name)

INDICATE IF: Kohane _____ Levite _____ Israelite _____

BUSINESS/PROFESSIONAL INFORMATION

OCCUPATION _____

NAME OF BUSINESS _____

BUSINESS ADDRESS _____

BUSINESS PHONE _____

E-MAIL BUSINESS _____

_____ Please include business info in Professional Directory

SPOUSE

FULL NAME (Mr., Dr., Ms., etc.) _____

BIRTHDATE _____

JEWISH BY _____ Birth _____ Traditional _____ Not Jewish
Conversion

CELL PHONE _____

E-MAIL PERSONAL _____

HEBREW NAME _____

(Transliterate; include father's & mother's Hebrew name)

INDICATE IF: Kohane _____ Levite _____ Israelite _____

BUSINESS/PROFESSIONAL INFORMATION

OCCUPATION _____

NAME OF BUSINESS _____

BUSINESS ADDRESS _____

BUSINESS PHONE _____

E-MAIL BUSINESS _____

_____ Please include business info in Professional Directory

CHILDREN

Please indicate whether children are Jewish by birth (mother is Jewish) or traditional conversion.

<u>NAME</u>	<u>SEX</u>	<u>HEBREW NAME</u>	<u>BIRTHDATE</u>	<u>BAR/BAT MITZVAH DATE</u>	<u>SCHOOL & GRADE</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

COLLEGE AGE CHILDREN'S INFORMATION

<u>NAME</u>	<u>COLLEGE</u>	<u>ADDRESS</u>	<u>PHONE</u>	<u>YEAR IN SCHOOL</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PLEASE COMPLETE BOTH SIDES and return this form to: Congregation B'nai Tikvah, 1558 Wilmot Rd., Deerfield, IL 60015

Name/Relationship to B'nai Tikvah Members _____

Previous Synagogue Affiliation _____

Who referred you to Congregation B'nai Tikvah _____

Yahrzeit Information

Do you wish to be notified of Yahrzeit dates? _____ Yes _____ No

If yes, please provide the following information:

<u>FULL NAME</u>	<u>HEBREW NAME</u> (include father's Hebrew name)	<u>MONTH/DAY/YEAR OF PASSING</u> (English Calendar; before/after sundown?)	<u>RELATIONSHIP</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Educational Background

Please indicate if any members of your family have expertise in any particular field of Judaism which may be helpful to us and which they would be willing to share, i.e., Torah reading, etc. _____

MEMBER _____

SPOUSE _____

SECULAR EDUCATION – College(s) attended/degree(s)

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JEWISH EDUCATION

JEWISH EDUCATION

Hebrew Day School _____

Hebrew Day School _____

Hebrew School _____

Hebrew School _____

Hebrew High School _____

Hebrew High School _____

Bar Mitzvah _____
(date and Parsha if known)

Bar Mitzvah _____
(date and Parsha if known)

Hebrew Reading Skills
(scale of 1-5, 5 being excellent)

Hebrew Reading Skills
(scale of 1-5, 5 being excellent)

Torah Reading _____

Torah Reading _____

Haftarah _____

Haftarah _____

Hazzan skills _____

Hazzan skills _____

Judaic Skills _____

Judaic Skills _____

OTHER SKILLS AND INTERESTS:

OTHER SKILLS AND INTERESTS:

SPECIAL AREAS OF INTEREST IN SYNAGOGUE LIFE:

SPECIAL AREAS OF INTEREST IN SYNAGOGUE LIFE:



Please mail or fax to:
CONGREGATION B'NAI TIKVAH
1558 WILMOT ROAD
DEERFIELD, IL 60015

FAX: (224) 515-3600
Attention: Polina Konanova

FROM: _____

Sender's Fax Number: _____

Sender's Phone Number: _____

Number of pages transmitted including the Fax Cover Sheet: _____

Additional Message: _____

Visa / MasterCard / Discover Usage Authorization Form Dues and School Fees

Please print your billing information as appears in your card

LAST NAME _____ FIRST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIPCODE _____

PHONE _____ E-MAIL ADDRESS _____

Unless otherwise stated, I hereby authorize Congregation B'nai Tikvah to use my credit card for payment of all Dues and School Fees billed on my membership account as follows:

___ Use my credit card, dividing my charges over 10 months, July 2011 through April 2012.

___ Use my credit card, dividing my charges over 4 payments, July 2011, October 2011, January 2012, April 2012.

___ Use my credit card to pay my account in full at this time. Total charge \$ _____

I would like the following to be charged on my credit card (please initial each one that applies)

Building Fund _____ High Holiday Pledge _____ Yizkor Book _____

Kiddush _____ Bar/Bat Mizvah Fee _____ Previous Years Balance _____

The Synagogue incurs a 2.5% processing fee for all credit card charges, amounting to approximately \$15,000 this fiscal year. If you do use your credit card, we would appreciate an additional donation to help defray these costs.

If you choose to make this type of donation, how much would you like to donate? \$ _____

Circle one: Visa Mastercard Discover Last 4 Digits Of The Card: _____

Signature _____ Date ____ / ____ / ____

Credit card information below must be shredded after entered in the system

Credit Card # _____ - _____ - _____ - _____

Expiration Date ____ / ____

Security Code ____