MEMBER INFORMATION FORM FOR SUN LAKES JEWISH CONGREGATION

Please complete the form below in order to update our database even if you have done so before, and send a copy to: Bety Dar, 25427 S. Glenburn Dr., Sun Lakes, AZ, 85248

Date _____

Name #1 _____

Name #2 _____

Address _____

City _____ Zip Code _____

Please indicate by an **x** which one email and telephone number is your primary.

( ) Name #1 Telephone _____

( ) Cell Phone _____

( ) Email _____

( ) Name #2 Telephone _____

( ) Cell Phone _____

( ) Email _____

Your anniversary (Month) _____ (Day) _____

Birthday #1 (Month) _____ (Day) _____

Birthday #2 (Month) _____ (Day) _____

What is your hometown/state? _____

Hebrew names (full name using transliteration, e.g. Reuven ben Yoseph or Malka bat Chaim):

Name #1 _____

Name #2 _____

Yahrzeits (English month only) …please limit to member's spouse, siblings, parents, children, grandparents, grandchildren

Date	Name	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____