

# Temple Beth Torah

A Reform Jewish Congregation  
Member, Union of Reform Judaism

[www.bethtorah.net](http://www.bethtorah.net)



P.O. Box 2020, Centreville, VA 20122 ♦ 4212-C Technology Court, Chantilly, VA 20151

## Temple Beth Torah Membership Application

For Membership Year June 2026– May 2027

We are thrilled that you have decided to join the Temple Beth Torah family! Please complete the application in its entirety and return it to the synagogue with your initial membership dues payment. For more information on membership, please contact the Membership Chair by email at [membership@bethtorah.net](mailto:membership@bethtorah.net).

If you wish to enroll your child(ren) in the Temple Beth Torah Religious School, please complete the Religious School Registration portion of this form, one form per child. Temple Beth Torah membership is a prerequisite for religious school enrollment. Tuition is separate for children enrolling in the Religious School. Please contact the Religious School Chair at [school@bethtorah.net](mailto:school@bethtorah.net) for more information on the religious school.

Please tell us about yourself and include all children under the age of 25, if applicable.

### PERSONAL INFORMATION

|                                               |                              |
|-----------------------------------------------|------------------------------|
| Name                                          | Name                         |
| Address                                       | Address                      |
| City/State/Zip                                | City/State/Zip               |
| Home Phone                                    | Home Phone                   |
| Work Phone                                    | Work Phone                   |
| Cell Phone                                    | Cell Phone                   |
| Email Address                                 | Email Address                |
| Occupation                                    | Occupation                   |
| Employer                                      | Employer                     |
| Child(ren)                                    | Date of Birth                |
|                                               | Date of Birth                |
|                                               | Date of Birth                |
| Are you an interfaith family? Yes / No        | Do you read Hebrew? Yes / No |
| Did a current member refer you to TBT? (name) |                              |

## MEMBERSHIP DUES AND COVENANT OF THE TEMPLE PILLARS

| Pillar Membership Level                                                                                                                                                                                                                                                                                                                                                                                       | Financial Commitment | Benefits                                                                                                                                                                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>CORNERSTONE OF TBT</b>                                                                                                                                                                                                                                                                                                                                                                                     | Select below*        | <ul style="list-style-type: none"> <li>• High Holiday Tickets</li> <li>• Invitation to Participate in all TBT Services and Events</li> <li>• Voting Privileges</li> <li>• Brotherhood &amp; Sisterhood Membership</li> </ul> |
| <input type="checkbox"/> Dual Adult Household                                                                                                                                                                                                                                                                                                                                                                 |                      | \$2,900                                                                                                                                                                                                                      |
| <input type="checkbox"/> Single Adult Household                                                                                                                                                                                                                                                                                                                                                               |                      | \$2,100                                                                                                                                                                                                                      |
| <input type="checkbox"/> Retired Couple                                                                                                                                                                                                                                                                                                                                                                       |                      | \$1,600                                                                                                                                                                                                                      |
| <input type="checkbox"/> Retired Single                                                                                                                                                                                                                                                                                                                                                                       |                      | \$ 900                                                                                                                                                                                                                       |
| <p>For membership purposes, it is the child's age as of September 30.<br/> Membership Dues do not include Religious School Tuition which follow.</p> <p>We invite you to take your membership to a higher level by electing to be a Defender of the Torah, Keeper of the Flame or Guardian of the Temple. Each of these pillars include the annual synagogue membership dues, school tuition is separate.</p> |                      |                                                                                                                                                                                                                              |
| <input type="checkbox"/> <b>GUARDIAN OF THE TEMPLE</b>                                                                                                                                                                                                                                                                                                                                                        | \$12,500             | All of the benefits below plus: <ul style="list-style-type: none"> <li>• 4 High Holiday guest tickets</li> </ul>                                                                                                             |
| <input type="checkbox"/> <b>KEEPERS OF THE FLAME</b>                                                                                                                                                                                                                                                                                                                                                          | \$8,500              | All of the benefits below plus: <ul style="list-style-type: none"> <li>• 2 High Holiday guest tickets</li> <li>• Complimentary access to all events</li> </ul>                                                               |
| <input type="checkbox"/> <b>DEFENDERS OF THE TRAH</b>                                                                                                                                                                                                                                                                                                                                                         | \$4,500              | The benefits include: <ul style="list-style-type: none"> <li>• Inscription on the annual Scroll of Giving</li> <li>• Access for two to any one event</li> </ul>                                                              |

## RELIGIOUS SCHOOL TUITION – Per child/per year

|                                                                            |                                                         |
|----------------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Torah Tots Member \$ 360                          | <input type="checkbox"/> Torah Tots – Non-Member \$ 480 |
| <input type="checkbox"/> Kindergarten – 3 <sup>rd</sup> Grade              | \$ 900                                                  |
| <input type="checkbox"/> Grades 4 <sup>th</sup> – 7 <sup>th</sup> *        | \$ 1,275                                                |
| <input type="checkbox"/> Grades 8 <sup>th</sup> – 12 <sup>th</sup>         | \$ 700                                                  |
| <input type="checkbox"/> B'nai Mitzvah Fee – Paid in 6 <sup>th</sup> Grade | \$ 1,500                                                |

## SYNAGOGUE ACTIVITIES

Temple Beth Torah is your temple. If you get more involved, there will be a double reward: our congregation will be more successful, and your membership will be more meaningful. Temple Beth Torah depends on the membership to fill positions on committees that run the congregation. Each member is strongly encouraged to participate in areas that interest them. We truly want and need the participation of all members. Please consider supporting at least one of the following areas so that we can continue to provide the services and programs that we all expect.

Please indicate all the areas in which you are interested. Don't hesitate to list other interests in the space at the end of the membership application. Volunteer service is a core Jewish value. Get involved in your temple! You'll be glad you did!

### **Education:**

- ☐ Religious School Board
- ☐ Teaching
- ☐ Assistant Teaching
- ☐ Adult Education
- ☐ Special Programs

### **Administration:**

- ☐ Membership
- ☐ Marketing
- ☐ Computer/Database Administration
- ☐ Website Administrator
- ☐ Communications (Newsletter, Blast)
- ☐ Fundraising

### **Youth Group:**

- ☐ Seniors (grade 9-12)
- ☐ Juniors (grade 7-8)

### **Religious Life:**

- ☐ Ritual Committee
- ☐ Adult Choir
- ☐ Interfaith Activities
- ☐ High Holiday Committee

### **Social Activities:**

- ☐ Brotherhood
- ☐ Sisterhood
- ☐ Holidays & Events
- ☐ Adult Activities
- ☐ Life-Cycle Events
- ☐ B'nai Mitzvah Committee
- ☐ Social Action
- ☐ Community Involvement

## YAHREZIT INFORMATION

Please provide either the Hebrew or English date of death so that your loved ones can be remembered at the appropriate Shabbat service and during the High Holidays Yizkor service.

| Name | Relation/Related to | Date of Death | After Sundown? |
|------|---------------------|---------------|----------------|
|------|---------------------|---------------|----------------|

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## **PAYMENT INFORMATION**

Dues statements are sent prior to the end of June. Dues may be paid in-full or paid in two installments due August 31 and December 31. If you need an alternate payment schedule please contact the Treasurer, Emily Ruben Bishop at [Treasurer@bethtorah.net](mailto:Treasurer@bethtorah.net) to discuss. Dues must be current to enroll children in Religious School or receive other benefits of membership, including High Holiday tickets. Payments can be made by check or electronically through the website (fee will apply). Please scan and send completed form to the Treasurer or mail to Temple Beth Torah, P.O. Box 2020, Centreville, VA 20122.

## **COMMENTS:**

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**The undersigned agrees to pay all dues and fees to Temple Beth Torah as stipulated and that the above information is correct.**

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

# Temple Beth Torah Religious School Registration

## For School Year September 2026 – May 2027

### STUDENT INFORMATION (One registration form per child)

|               |            |       |
|---------------|------------|-------|
| Last Name     | First Name |       |
| Hebrew Name   | Nickname   |       |
| Date of Birth | Age        | Grade |
| Gender        | School     |       |

### PARENT INFORMATION

|                                                         |                 |
|---------------------------------------------------------|-----------------|
| Parent/Guardian                                         | Parent/Guardian |
| Address                                                 | Address         |
| City/State/Zip                                          | City/State/Zip  |
| Cell Phone                                              | Cell Phone      |
| Home Phone                                              | Home Phone      |
| Work Phone                                              | Work Phone      |
| Email                                                   | Email           |
| Besides parent/guardian, authorized to drop-off/pick-up |                 |
| If divorced, custodial parent or guardian               |                 |
| Anyone who cannot exercise custody                      |                 |

### RELIGIOUS SCHOOL BACKGROUND

|                                                                                                             |                                         |
|-------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| Previous Religious School                                                                                   |                                         |
| 1 <sup>st</sup> Year in Religious School                                                                    | Has your child been consecrated? Yes/No |
| Years in Jewish Studies                                                                                     | Years in Hebrew Studies                 |
| Special Learning Situations                                                                                 |                                         |
| Please let us know if there is any information the Religious School should have to meet your child's needs. |                                         |

### EMERGENCY INFORMATION

|                                                                                 |                     |
|---------------------------------------------------------------------------------|---------------------|
| Please provide two emergency contacts in case we cannot reach a parent/guardian |                     |
| Emergency Contact 1                                                             | Emergency Contact 2 |
| Name                                                                            | Name                |
| Relationship                                                                    | Relationship        |
| Cell Phone                                                                      | Cell Phone          |

### MEDICAL INFORMATION

|                                                |                    |
|------------------------------------------------|--------------------|
| Allergies                                      | Medical Conditions |
| Emergency medications and dosing instructions: |                    |

### INSURANCE INFORMATION

|                                                                                     |          |
|-------------------------------------------------------------------------------------|----------|
| Please provide insurance information in case emergency medical service is required. |          |
| Name of Policy                                                                      | Policy # |
| Policy Name Holder                                                                  |          |
| Preferred Hospital, if possible                                                     |          |