

5770 MEMBERSHIP APPLICATION FORM

Temmy Latner Forest Hill Jewish Centre
 446 Spadina Road Suite 206 Toronto ON M5P 3M2
 Tel: 416-483-0883 Fax: 416-483-6712
 Email info@fhjc.ca



Family Name (s) _____

- New** Please complete all 4 pages, sign and return with payment – **5770 NEW MEMBERS- 25% OFF**
Renewal Please sign and complete all new or changed information on the following 4 pages

Membership Categories	Annual Dues	New member Dues
Benefactor Membership*	\$3,600 <input type="checkbox"/>	
Patron Membership*	\$2,000 <input type="checkbox"/>	
General Membership	\$1,100 <input type="checkbox"/>	\$825 <input type="checkbox"/>
Young Membership (Families and Singles Under 35)	\$750 <input type="checkbox"/>	\$575 <input type="checkbox"/>
Single Adults (over 35)	\$750 <input type="checkbox"/>	\$575 <input type="checkbox"/>
Seniors (over 65)	\$500 <input type="checkbox"/>	\$375 <input type="checkbox"/>
Students 18-25	\$250 <input type="checkbox"/>	\$200 <input type="checkbox"/>
Newlyweds - if married by Rabbi Karfunkel	First Year Free	First Year Free

Please add \$25 for credit card convenience		\$
YES! I agree to subsidize those in need:		
Sponsor a family for the High Holidays	<input type="checkbox"/> \$360	
Sponsor an individual for the High Holidays	<input type="checkbox"/> \$180	
Sponsor a family for a Shabbaton	<input type="checkbox"/> \$ 90	
Sponsor an individual for a Shabbaton	<input type="checkbox"/> \$ 36	
Total payable to Forest Hill Jewish Centre		\$

*Benefactor & Patron Memberships are voluntary for those who wish to contribute over and above the general membership fees

All membership dues are tax deductible.
 Cheques should be made payable to the Temmy Latner Forest Hill Jewish Centre
You may register on-line at www.fhjc.ca

Card Type: Visa Mastercard American Express
 Cardholder's name _____ Card Number _____
 Expiry date _____

Financial Difficulty: No one will be denied membership due solely to financial difficulties. Please contact the office to make special arrangements. All communications will be dealt with in a sensitive and confidential manner.

Rabbi Approval: I/We acknowledge that approval of Membership is subject to confirmation after an interview with the Centre Rabbi.

Cardholder signature _____ Dated _____

HOUSEHOLD INFORMATION

APPLICANT		APPLICANT SPOUSE	
Name:	Title:	Name:	Title:
Hebrew Name:		Hebrew Name:	
Date of birth:		Date of birth:	
Married <input type="checkbox"/>	Date: _____	Married <input type="checkbox"/>	Date: _____
Single <input type="checkbox"/>	Widowed <input type="checkbox"/>	Single <input type="checkbox"/>	Widowed <input type="checkbox"/>
Divorced <input type="checkbox"/>		Divorced <input type="checkbox"/>	
Address:		Address:	
City:	Postal Code:	City:	Postal Code:
Telephone:		Telephone:	
Cell:		Cell:	
Email:		Email:	
Father's English & Hebrew Names:		Father's English & Hebrew Names:	
Son of: Kohen <input type="checkbox"/>	Levi <input type="checkbox"/>	Yisroel <input type="checkbox"/>	
Daughter of: Kohen <input type="checkbox"/>		Levi <input type="checkbox"/>	
Yisroel <input type="checkbox"/>			
Born Jewish <input type="checkbox"/>	Adopted <input type="checkbox"/>	Born Jewish <input type="checkbox"/>	Adopted <input type="checkbox"/>
Converted by:		Converted by:	
Occupation:		Occupation:	
Business Name:		Business Name:	
Business Address:		Business Address:	
Business Phone #:		Business Phone #:	
Business e-mail:		Business e-mail:	

CHILDREN

Children over the age of 25 must apply for individual membership

English Name	Hebrew Name	Date of Birth			School Attending
		Day	Month	Year	

YAHREZITS

Full Hebrew Name	Full English Name	Relationship	English Date of Death (incl. year & time of day)

QUESTIONNAIRE

What kind of activities would interest you at the Centre?	
<input type="checkbox"/> Infant/Toddler Programs	<input type="checkbox"/> Social Programming
<input type="checkbox"/> Hebrew School for Children	<input type="checkbox"/> Women's Monthly Group
<input type="checkbox"/> Bar/Bat Mitzvah Classes	<input type="checkbox"/> Adult Jewish Education
<input type="checkbox"/> Shabbat Services	<input type="checkbox"/> Hebrew Reading Crash Course
<input type="checkbox"/> High Holiday Services	<input type="checkbox"/> Women's/Men's Seminars
<input type="checkbox"/> Weekday Services	<input type="checkbox"/> Trips to Israel
<input type="checkbox"/> Singles Events	<input type="checkbox"/> Weekend Shabbaton Seminars
<input type="checkbox"/> Young Couples Events	<input type="checkbox"/> Special Holiday Programs/Seminars
Other _____	

In order to serve you better, please complete the following:

- Would you like to subscribe to Thursday Shabbos Times _____ Weekly Newsletter _____ Centre Events _____ emails?
- What type of volunteer work have you done in the past and for which organizations? _____

- Would you be interested in hosting or being invited to a home study group? _____

Would you be interested in getting involved in or forming any one or more of the following Centre member committees?	
<input type="checkbox"/> Marketing	<input type="checkbox"/> Golf
<input type="checkbox"/> Chesed/Hospitality	<input type="checkbox"/> Fundraising
<input type="checkbox"/> High Holidays	<input type="checkbox"/> Forest Hill Institute of Torah
<input type="checkbox"/> Holiday/Festivals	<input type="checkbox"/> Social Events
<input type="checkbox"/> Infant/Toddler Programs	<input type="checkbox"/> Single Events
<input type="checkbox"/> Major Events	<input type="checkbox"/> Family Events

TEMMY LATNER FOREST HILL JEWISH CENTRE DIRECTORY: I/We hereby ____ agree OR ____ do not agree to have my/our name, contact information and occupation(s) printed in the Centre Directory should the Centre, from time to time, decide to print such a directory.

PRIVACY POLICY: THE PERSONAL INFORMATION YOU HAVE PROVIDED HEREIN IS SUBJECT TO THE CENTRE'S PRIVACY POLICY, A SUMMARY OF WHICH IS ENCLOSED (AND THE FULL COPY OF WHICH CAN BE OBTAINED FROM CENTRE'S OFFICE).

BY EXECUTING AND RETURNING THIS APPLICATION TO THE TEMMY LATNER FOREST HILL JEWISH CENTRE, I/WE ACKNOWLEDGE THAT I/WE HAVE READ AND UNDERSTOOD THE CENTRE'S PRIVACY POLICY AND I/WE AGREE THAT THE CENTRE CAN COLLECT, USE, RETAIN AND DISCLOSE THE PERSONAL INFORMATION IN ACCORDANCE WITH ITS PRIVACY POLICY. THE CENTRE'S PRIVACY POLICY AND MY/OUR CONSENT, APPLY TO ALL OF THE PERSONAL INFORMATION PROVIDED BY ME/US WHICH IS CURRENTLY IN THE CENTRE'S POSSESSION AND MAY SUBSEQUENTLY BE PROVIDED BY ME/US, UNLESS I/WE SUBSEQUENTLY REVOKE MY/OUR CONSENT IN WRITING.

I/We hereby certify that all information that I have given is true and correct and that I, and all members of my immediate named family herein, are Jewish by birth or by conversion in accordance with Orthodox Jewish Law (Halacha).

Signature of Applicant

Dated

Signature of Applicant

Dated

HIGH HOLIDAY TICKET ORDER 5770

ROSH HASHANA – SEPT 18, 19, 20

YOM KIPPUR – SEPT 27, 28



	A MAIN SANCTUARY	B MASHU MASHU	C CHILDRENS' PROGRAM
MEMBERS	FREE	FREE	FREE
NON-MEMBERS	\$225	\$100	\$ 50

Members as well as non-members must fill out this form below to reserve seats.

Last Name	First Name	Male/Female	Option A, B or C	Age of Child

Preferred seating given on a first come first serve basis. Please indicate your seating preference:

Supervised babysitting and programming available during Rosh Hashanna and Yom Kippur only.
Supervised babysitting, but no programming, also available during Kol Nidre and Neilah.

All Non-member ticketing must be completed below:

Amount payable for Option A	# Tickets	X	\$225	=	\$
Amount payable for Option B	# Tickets	X	\$100	=	\$
Amount payable for Option C	# Tickets	X	\$ 50	=	\$
Total cost				=	\$

Non-member contact information

Card Type: Visa Mastercard American Express

Name _____

Cardholder's name _____

Address _____

Card number _____

Telephone _____

Expiry date _____

Email _____

Signature _____

Cheques payable to Forest Hill Jewish Centre
Register online at www.fhjc.ca

OPTION B – MASHU MASHU ALTERNATIVE SERVICE

Abridged High Holiday Services ♦ Thought Provoking Classes ♦ Explore New Ideas

“Grill the Rabbi” with your questions on Judaism. No question will go unanswered.

Where: Mashu Mashu Restaurant, 387 Spadina Road

When: Rosh Hashana 10:00 a.m. – 12:00 p.m. (first day only)
Yom Kippur 10:00 a.m. 12:30 p.m.

REFRESHMENTS WILL BE SERVED ♦ BABYSITTING AVAILABLE AT THE CENTRE

HIGH HOLIDAY SCHEDULE 5770

EREV ROSH HASHANA

FRIDAY, SEPTEMBER 18

Candle Lighting 7:04 p.m.
Davening 7:04 p.m.

ROSH HASHANA I

SATURDAY, SEPTEMBER 19

Davening 8:15 a.m.
Children's
Programming 10:00 a.m.
Kiddush 10:45 a.m.
Drasha 11:15 a.m.
Mincha 7:00 p.m.
Candle Lighting after 8:04 p.m.

ROSH HASHANA II

SUNDAY, SEPTEMBER 20

Davening 8:15 a.m.
Children's '
Programming 10:00 a.m.
Kiddush 10:45 a.m.
Drasha/Shofar 11:15 a.m.
Tashlich meet
At the Centre 4:30 p.m.
Mincha 7:00 p.m.
Maariv 8:02 p.m.

FAST OF GEDALIA

MONDAY, SEPTEMBER 21

Fast Begins 5:38 a.m.
Fast Ends 7:58 p.m.

EREV YOM KIPPUR

SUNDAY, SEPTEMBER 27

Mincha 4:00 p.m.
Candle Lighting 6:48 p.m.

YOM KIPPUR

MONDAY, SEPTEMBER 28

Davening 9:15 a.m.
Children's Programming 10:30 a.m.
Yizkor/Drasha 11:00 a.m.
Rabbi's Class 4:15 p.m.
Mincha 4:45 p.m.
Neilah 5:45 p.m.
Shofar Blowing 7:46 p.m.

EREV SUKKOS

FRIDAY, OCTOBER 2

Candle Lighting 6:38 p.m.
Mincha 6:38 p.m.

SUKKOS I

SATURDAY, OCTOBER 3

Davening 9:15 a.m.
Community Kiddush
At the Karfunkels
Rabbi's Class 5:40 p.m.
Mincha 6:23 p.m.
Earliest
Candle Lighting 7:38 p.m.

SUKKOS II

SUNDAY, OCTOBER 4

Davening 9:15 a.m.
Rabbi's Class 5:35 p.m.
Mincha 6:35 p.m.

HOSHANA RABBA

FRIDAY, OCTOBER 9

Davening 6:40 a.m.
Candle Lighting 6:26 p.m.
Mincha 6:26 p.m.

SHEMINI ATZERES

SATURDAY, OCTOBER 10

Davening 9:15 p.m..
Mincha 6:11 p.m.
Auction 6:43 p.m.
Maariv & Dancing 7:25 p.m.
Earliest
Candle Lighting 7:25 p.m.

SIMCHAS TORAH

SUNDAY, OCTOBER 11

Davening 9:15 p.m..
Dancing 10:30 a.m.
Mincha 6:20 p.m.
Maariv 7:23 p.m.
Yom Tov Ends 7:23 p.m.