



NHS North Hendon Shul

North Hendon Shul Membership Form – Page 1 of 2

WHY SHOULD I JOIN NORTH HENDON SHUL?



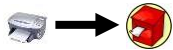
The North Hendon Shul, founded in 1948, is an active local community that, as well as Services, provides its members with many facilities, Shiurim and other functions. We accept membership from all local residents, from all backgrounds and levels of Orthodoxy, who wish to join us for Services and use our facilities. We encourage the participation of Members in all events.

The Synagogue is led by a caring, learned Rav, Rabbi Dovid Cohn, who joined us in 2002 to succeed our then Rav, Rabbi Dovid Cooper zt"l, who had ministered to the Shul for over forty years. The Shul is fortunate to have the services of a most melodious Ba'al Tefillah, Mr Tolly Rose, who leads the Services fortnightly, on the Yomim Noraim and on Yom Tov and special occasions.

The Shul is run by active Honorary Officers as well as the Board of Management, Secretary and volunteers who look after the welfare of the Synagogue and the smooth running of all its activities. Further details and information, including how to subscribe to our mailing list, can be found on our website at www.northhendon.co.uk. A weekly Newsletter is e-mailed to all those on the mailing list, thereby ensuring that all in our community are always well informed.

BECOME A MEMBER – GET INVOLVED – SUPPORT YOUR LOCAL SHUL!

WHAT DO I NEED TO DO WITH THIS FORM?



Complete all appropriate areas, either on paper or electronically, and return the completed form to our Treasurer at NorthHendonTreasurer@gmail.com or place in the letter box inside the shul's foyer. If married, please also include a copy (not original) of your Kesuba.

FAMILY DETAILS

Family Name			
Man's Name			
Woman's Name		Woman's Maiden Surname	
Child 1 Name*		Date of Birth	
Child 2 Name		Date of Birth	
Child 3 Name		Date of Birth	
Child 4 Name		Date of Birth	
Child 5 Name		Date of Birth	
Man's Hebrew Name (including father's name) for call-up to the Torah			

* Only complete for dependent children still living at home or in full-time education away from home.

Address	
Postcode	

Telephone Details 	Home	
	Work	
	Mobile	(Man)
	Mobile	(Woman)
	Other	

Email addresses 	Man		Include on mailing list? (Y/N)
	Woman		
	Other		

Please note that this form and the details you provide will be kept in the strictest confidence by our Treasurer and Secretary

A Publication of the NHS Website @ www.northhendon.co.uk
Snail mail to: 31 Holders Hill Crescent, Hendon NW4 1NE



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TYPE OF MEMBERSHIP (TICK BOX)



<input type="checkbox"/>	Full
<input type="checkbox"/>	Associate
<input type="checkbox"/>	Country

Full details of Membership Fees and payments by Gift Aid can be obtained from the Treasurer (NorthHendonTreasurer@gmail.com).

SEATING (only answer if applying for FULL membership)

Number of Men's Seats required	
Number of Women's Seats required	
Seat Position Preference	

Should you wish to discuss seating personally please speak with the Secretary Henry Ehreich on 020 8203 0797

FAMILY YAHRZEITS (OBSERVED BY APPLICANT AND SPOUSE)

Hebrew name of deceased (including their Father's Hebrew name)	Relationship to applicant	Date of Yahrzeit e.g. 24 Nissan

FINAL QUESTIONS

Existing Burial Society Member?	If yes give details
Do you wish to Join the Adass Yisroel Burial Society?	
At which Synagogue or venue where you were married?	
Date of wedding?	
Name of the officiating Rabbi?	
Provide details of the Synagogues where you have recently been or are currently a member	

SIGNATURE

Signature	Date	/ / (DD/MM/YYYY)
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Applications for membership are subject to approval of the Rabbi and Honorary Officers of the Synagogue.