

Welcome to Central Oregon's friendliest Jewish Reform congregation! Pull up a seat at Erev and family Shabbat Services, Shabbat dinners, holiday services and celebrations, children's programs, adult education, Torah study, social action, and events planned just for fun.

**Member Information:**

|   |                                  |
|---|----------------------------------|
| Member 1 _____                            | Member 2 _____                   |
| Street _____                              | City _____ State ____ Zip: _____ |
| Is Central Oregon your primary residence? | Yes ____ No ____                 |
| Home phone _____                          | Home phone _____                 |
| Email 1 _____                             | Email 2 _____                    |
| Cell 1 _____                              | Cell 2 _____                     |

May we send you occasional texts in special group text? Yes \_\_\_\_ No \_\_\_\_

May we use photos of you taken at TBT events on our private Facebook page? Yes \_\_\_\_ No \_\_\_\_

May we use photos of your children at TBT events on our private Facebook page? Yes \_\_\_\_ No \_\_\_\_ NA \_\_\_\_

**On Facebook?** Provide your Facebook user name(s) below and TBT's Facebook administrator will "friend" you and give you access to TBT's private, members' group.

Member 1 FB username \_\_\_\_\_ Member 2 FB username \_\_\_\_\_

I prefer to "opt out" of TBT's Facebook group: \_\_\_\_\_ (please initial)

**Dates to celebrate.** Provide your special dates below and we will send you warm wishes in TBT's monthly newsletter:

Wedding Anniversary (M/D/Y) \_\_\_\_\_

**Birthdays**

|                   |                      |
|-------------------|----------------------|
| Member 1 _____    | Month/Day/Year _____ |
| Member 2 _____    | Month/Day/Year _____ |
| Dependent 1 _____ | Month/Day/Year _____ |
| Dependent 2 _____ | Month/Day/Year _____ |
| Dependent 3 _____ | Month/Day/Year _____ |

I prefer to "opt out" of sharing special dates: \_\_\_\_\_ (please initial)

**Yahrzeit**, is observed each year at Shabbat services at the anniversary of a death. Please include to whom they are related, i.e. Jane's Mother. If you need to add more names later, send to the TBT Treasurer at [TBTtreasurer@gmail.com](mailto:TBTtreasurer@gmail.com).

|              |                     |                    |
|--------------|---------------------|--------------------|
| Name 1 _____ | Date of death _____ | Relationship _____ |
| Name 2 _____ | Date of death _____ | Relationship _____ |
| Name 3 _____ | Date of death _____ | Relationship _____ |
| Name 4 _____ | Date of death _____ | Relationship _____ |

**Your Membership Pledge:**

Thank you for joining Temple Beth Tikvah. For the fiscal year July 1, 2023 — June 30, 2024, the suggested annual membership pledge is \$1,000 per household. Your contribution supports our Rabbi and the many worship services, celebrations, events, and activities available to our TBT community. While your financial contribution funds the congregation, it is your time, effort, ideas, and involvement that we value most.

We never want finances to be a barrier to your participation in our congregation. If you are unable to pay the suggested pledge, please enter an amount that fits your financial circumstances. If you have any questions or concerns, contact our Treasurer, Michelle Mahony at [Treasurer@bethtikvahbend.org](mailto:Treasurer@bethtikvahbend.org). *Your financial information is kept strictly confidential.*

We appreciate any additional contributions you can offer to help subsidize our members who cannot afford a full contribution, and to allow us to continually expand our programs and activities.

Please enter your Pledge amount for the current fiscal year – through June 30th and also provide your planned Pledge amount for the next full fiscal year July 1 – June 30. The amounts do not have to be the same. Note that you can always adjust your pledges, if necessary, by contacting our TBT Treasurer.

**Initial Membership Pledge for 2023 – 2024** \$ \_\_\_\_\_

Additional Donation for 2023 - 2024 \$ \_\_\_\_\_

**Total Annual Membership Pledge 2023 - 2024** \$ \_\_\_\_\_

**Planned Annual Pledge 2024 - 2025** \$ \_\_\_\_\_

**Planned Payment Schedule** One-time \_\_\_\_ Semi-Annual \_\_\_\_ Quarterly \_\_\_\_ Monthly \_\_\_\_

**Which payment method do you plan to use?**

\_\_\_\_ Pay by check: make checks payable to Temple Beth Tikvah and mail your completed application to: Temple Beth Tikvah, P.O. Box 7472, Bend, OR 97708-7472

\_\_\_\_ Pay by credit card: click link below or go to TBT website <https://bethtikvahbend.org/join/> and click on "Donate" button at the bottom.

Please set up your payments to be paid at the appropriate time. We do not routinely send out statements.

Phone inquiries or messages to: (541) 388-8826

E-mail inquiries and correspondence to: [shalom@bethtikvahbend.org](mailto:shalom@bethtikvahbend.org)

Temple Beth Tikvah's website: <https://bethtikvahbend.org>

**What's the best way to become part of the TBT community?** Attend services and events. Sit on committees. Get involved. Working together is the best way to create shared experiences that lead to friendships and good times.

*Please print and have the following two-page survey completed by each adult family member.*

**Select top three reasons why you joined TBT:**

- |  |  |
|--|--|
| <input type="radio"/> Attend Shabbat services                        | <input type="radio"/> Access religious school and bar/bat mitzvah training |
| <input type="radio"/> Attend High Holy Days services                 | <input type="radio"/> Engage in social action and community service        |
| <input type="radio"/> Find spiritual fulfillment                     | <input type="radio"/> Access support for birth-to-death lifecycle events   |
| <input type="radio"/> Socialize with other Jewish people             | <input type="radio"/> Other: _____   |
| <input type="radio"/> Engage in adult Jewish learning                |  |
| <input type="radio"/> Connect with Rabbi                             |  |
| <input type="radio"/> Expose my child to Jewish peers and traditions |  |

**How do you enjoy spending your free time? Select as many as you like.**

- |  |   |
|--|---|
| <input type="radio"/> Skiing                     | <input type="radio"/> Yoga / Pilates / Exercise |
| <input type="radio"/> Snowboarding               | <input type="radio"/> Listening to Music        |
| <input type="radio"/> Camping                    | <input type="radio"/> Playing Mah Jongg         |
| <input type="radio"/> Bicycling                  | <input type="radio"/> Playing Bridge            |
| <input type="radio"/> Fishing                    | <input type="radio"/> Playing Board Games       |
| <input type="radio"/> Watching Movies            | <input type="radio"/> Golf                      |
| <input type="radio"/> Reading & discussing books | <input type="radio"/> Knitting or quilting      |
| <input type="radio"/> Hiking / Walking           | <input type="radio"/> Other: _____              |

**What skills or experiences do you have that you can share with TBT?** Everyone has something special to offer. Think about your experience and what you enjoy, for example — administration, organizing, cooking, baking, music, fundraising, finance, event planning. Whether you have expertise in a specific subject or simply a passion you enjoy, we value whatever talent, energy and ideas you contribute.

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As a small congregation, we rely on our members to help us run our operation. Even a small commitment of your time and skills can provide a significant benefit – for you and the community.

**Please indicate the areas in which you can volunteer (check as many as apply).**

- |   |   |
|---|---|
| <input type="radio"/> Ritual /Services        | <input type="radio"/> Communications: Marketing/<br>PR/Newsletter |
| <input type="radio"/> Jewish Holidays         | <input type="radio"/> Member Engagement                           |
| <input type="radio"/> Music (esp at Services) | <input type="radio"/> Sunday School                               |
| <input type="radio"/> Social Action           | <input type="radio"/> Hebrew School                               |
| <input type="radio"/> Fundraising             | <input type="radio"/> Security                                    |
| <input type="radio"/> Finance                 | <input type="radio"/> Other: _____                                |

If you joined us for High Holy Days or another event, tell us what you enjoyed:

\_\_\_\_\_

Have you previously belonged to a Jewish congregation? Yes \_\_\_\_ No \_\_\_\_

Congregation name \_\_\_\_\_

City / State \_\_\_\_\_

Affiliation (Reform, Orthodox, etc) \_\_\_\_\_

Your Name \_\_\_\_\_

email \_\_\_\_\_

Phone \_\_\_\_\_