

# CONGREGATION EMANU EL SISTERHOOD MEMBERSHIP APPLICATION 2024-2025

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Phone (home) \_\_\_\_\_ Phone (mobile) \_\_\_\_\_

Email Address \_\_\_\_\_

Contact Preference (*please select*)     Email     Phone

Birthday Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year (*optional*): \_\_\_\_\_

## **MEMBERSHIP CATEGORIES** (*please select*)

- Sustaining Patron                      \$150
- Contributing Patron                      \$100
- Supporting Member                      \$50
- Senior Member (70-74)                \$36
- Complimentary Member (75+) Donation Optional
- Under Age 40                              \$25

## **VOLUNTEER OPPORTUNITIES** (*check box*)

- New Traditions Gift Shop
- Membership
- Sisterhood Office
- Cooking/Baking at Temple
- Publicity and Communications
- Fundraising
- Youth
- Programming
- Social Action
- Baking at Home
- Technology and Computers
- Volunteering as Needed
- Decorations

## **PAYMENT OPTIONS**

### **CHECK MADE PAYABLE TO:**

Emanu El Sisterhood  
1500 Sunset Blvd.  
Houston, TX 77005

*or*

### **CREDIT CARD:**

Name on card:  
\_\_\_\_\_

Card #:     Amex     MC     Visa

Card #:  
\_\_\_\_\_

Expiration: \_\_\_\_\_ Security Code: \_\_\_\_\_

*or*

### **ONLINE:**

[www.emmanuelhouston.org/sisterhood](http://www.emmanuelhouston.org/sisterhood)

**NOTE:** Please return this completed form even if you qualify as a complimentary member.

\*Fiscal year begins May 1