



Melbourne  
Hebrew  
Congregation  
ק"ק שארית ישראל

**MHC MEMBERSHIP APPLICATION FORM**

*I, the undersigned, hereby apply for membership for the Melbourne Hebrew Congregation, and if accepted I undertake to abide by the rules laid down by the constitution.*

*I certify that I am of the Jewish Faith; and that I am not married contrary to the laws of traditional Orthodox Judaism, and that I have not neglected to carry out the Abrahamic Covenant (Brit Milah) in my family.*

Surname.....

First Name.....

Hebrew Name.....ben/bat.....

MaidenName (IfApplicable).....

State whether Cohen,Levite or Israelite.....

Place of Birth.....

Date of Birth.....

If married, give name of Synagogue.....

Date of Marriage.....

Occupation.....

Phone Home..... Work..... Mobile.....

Email.....

Spouse's Name.....

Maiden Name (IfApplicable).....

Spouse's Hebrew Name.....ben/bat.....

Place of Birth.....

Date of Birth.....

**Names and ages of children**

(i) English.....

Date of Birth.....School.....

Hebrew Name.....ben/bat.....

(ii) English.....

Date of Birth.....School.....

Hebrew Name.....ben/bat.....

(iii) English.....

Date of Birth.....School.....

Hebrew Name.....ben/bat.....

**Yahrzeits (If applicable)**

(i) Name.....Relationship.....

English date of passing.....Hebrew (if known).....

(ii) Name.....Relationship.....

English date of passing.....Hebrew (if known).....

(iii) Name.....Relationship.....

English date of passing.....Hebrew (if known).....

(iv) Name.....Relationship.....

English date of passing.....Hebrew (if known).....

**NUMBER of SEATS REQUESTED**

Male.....Female.....

**SIGNATURE OF APPLICANT:**

.....

**DATE:**

.....

**SIGNATURE OF RABBI:**

.....

**DATE:**

.....

**SEATS ALLOCATED:**

Ground Floor

Seat No.....

Ladies Gallery

Seat No.....

**JOINING FEE:**

\$250.00 Per Family

\$200.00 Single

## **Seeing in a different light**

Established 1841

Synagogue Chambers: Toorak Road, South Yarra Victoria 3141 Australia

P O Box 372 South Yarra Victoria 3141 Australia

Telephone +61 3 9866 2255

Facsimile + 61 3 9866 2022

[mhc@melbournesynagogue.org.au](mailto:mhc@melbournesynagogue.org.au)

[www.melbournesynagogue.org.au](http://www.melbournesynagogue.org.au)

Registered Number AOO19856D ABN 39 003 125 142