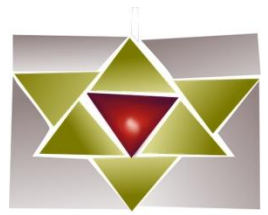


# Temple Emanuel of the Merrimack Valley

## Household Information Form

(All information will be kept confidential)

Please return to the Temple at P.O. Box 1123 Lowell, MA 01853



Today's Date: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Listing Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

### Adult Members of Household

**Member 1**

**Member 2**

Full Name: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_

Nickname (how you prefer to be addressed) \_\_\_\_\_

E-mail: @ home: \_\_\_\_\_

@ work: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_

Date of Birth \_\_\_\_\_

### Children Currently Living in Household (or Adult Children who wish to stay informed)

Full Name: \_\_\_\_\_ Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Other information or special needs: \_\_\_\_\_

Full Name: \_\_\_\_\_ Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current School Grade: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Other information or special needs: \_\_\_\_\_

Full Name: \_\_\_\_\_ Hebrew Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current Grade: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Other information or special needs: \_\_\_\_\_

(Please use additional page as needed)

## Yarzeit and Yizkor Remembrances

Temple Emanuel embraces the tradition of remembering and honoring loved ones who are no longer with us. Names are read during the annual Neila services on Yom Kippur and during the weekly Yarzeit remembrances. Names and dates are included in the monthly bulletin and you will receive a Yarzeit remembrance card the month prior to the anniversary.

Please include names, date including the year, relationship and pronunciation hints. Please indicate if you would prefer that the anniversary be observed according to the Hebrew calendar by checking the Hebrew calendar box. If neither is specified the remembrance will follow the Gregorian calendar. Please use additional pages as needed. On Yom Kippur we publish a "Scroll of Remembrance"; you may choose to include names in the book for \$5/name or a donation.

Name	Hebrew Date	Gregorian Date	Relationship/ Pronunciation	Yarzeit card?	Hebrew calendar	Remembrance
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Remembered by Text in the Remembrance Book/ Scroll: " Remembered by: \_\_\_\_\_ "

## Volunteer Opportunities / Committees / Activities at TEMV

Temple Emanuel prides itself on the number of active members who volunteer. There are volunteer opportunities and committees available for anyone who wishes to participate. Anyone who wishes to get involved is encouraged to do so. Volunteers help clean the Temple, set up and take down chairs before and after special events, and much more.

Please indicate which committees or activities you may be interested in. Please check all that apply. Be assured that this is not a commitment, just an indication of interest. Please include the names of anyone in the household who may be interested.

Education _____	Fundraising _____
Membership _____	Music (at services) _____
Social Action _____	General Support _____
House _____	Temple Choir _____
Ritual _____	Lay leader _____
Adult Education _____	Mah Jong _____
Publicity _____	Yoga _____
Youth Group _____	Anything else? _____

## Special Events

We celebrate special occasions such as birthdays, anniversaries, and other special events during services four times a year when we turn the sunwheel. We would only include the month and the event and not the date or the year. To be included please list the event, your name (s) and the full date: month, date, and year. If you have strong feelings that you prefer your name(s) not be included please indicate that as well, especially since membership forms used to include birthdates.

Occasion_____	Date: _____	Occasion_____	Date: _____
Occasion_____	Date: _____	Occasion_____	Date: _____
Occasion_____	Date: _____	Occasion_____	Date: _____
Occasion_____	Date: _____	Occasion_____	Date: _____

## Media Release

I give my permission to be photographed/video taped/audio taped as part of temple activities or for promotional materials, including the temple website and the temple bulletin. The Student Registration Form includes a media release signature for the children. For other minor children, please print their names then sign and date, giving permission for them to be photographed or videotaped.

_____ Name (Print)	_____ Signature	_____ Date
_____ Name (Print)	_____ Signature	_____ Date
_____ Minor Child (Please Print)	_____ Parent or Guardian Signature	_____ Date
_____ Minor Child (Please Print)	_____ Parent or Guardian Signature	_____ Date

## Outside Volunteer Activities

Many Temple Emanuel members and friends volunteer in other organizations and clubs, such as Habitat for Humanity, Amnesty International, environmental groups, League of Women Voters and the Walk for Hunger. The temple wants to be a clearinghouse for these volunteer efforts. Please put your name and the name of the organization and we'll create a directory.

_____ Name (Print)	_____ Organization(s)
_____ Name (Print)	_____ Organization(s)
_____ Name (Print)	_____ Organization(s)

## Professional Directory

We are creating a networking group of temple members who are professionals or small business owners. Temple members might be more inclined to utilize a merchant, contractor, lawyer or other service of a temple member.

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

Business Name: \_\_\_\_\_

Business phone and address: \_\_\_\_\_

Description of your business: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Additional Comments

What special talents, skills or interests do you or other family members have that might be useful to the temple? We always welcome comments and feedback which might help us serve your needs. Please tell us anything else about you and your family

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