

## **Shoreshim registration materials**

**Please complete and return the registration form and invoice**

**Send to:**

Shoreshim

Attn: Membership

P.O. Box 2516

Reston, VA 20195

### **About Shoreshim**

Shoreshim is a participatory congregation with each adult member serving on a holiday committee and a Shabbat committee. Teenagers are encouraged to join a holiday committee, but are not required to do so.

Shoreshim is proud to offer a senior membership to those who are 60 yrs. or older. While we encourage our senior members to join committees, they have no obligation to serve on holiday or Shabbat committees.

For more information, please visit our website at:

<http://www.restonshoreshim.org/>

## Shoreshim Membership Registration

July 1, \_\_\_\_ to June 30, \_\_\_\_

Adults	Primary Member	Spouse/Partner
First Name		
Last Name		
Gender (M/F)**		
Home Phone		
Work Phone		
Cell Phone		
Email1		
Email2		
Member? (Y/N)		

Children	Child 1	Child2	Child 3	Child 4
First Name				
Last Name				
Gender (M/F)**				
DoB*				
School				
Grade				
Shoreshim School (Y/N)				
Grade				

Address	Street	Apt. # (2 <sup>nd</sup> line)	City	Zip
Primary				
Secondary*				

Additional Information\*

Provide any additional Information you wish to share!

\* Indicate whether or not you wish to receive emails from other members – this list is not for official Shoreshim business. It provides a forum for exchange of ideas.

\*\* Denotes optional

Please write your name and address here if there is no label provided	Name: _____
	Address: _____ _____

I authorize the release of my pictures on the Shoreshim website.

Signature: \_\_\_\_\_

**Shoreshim Annual Membership Dues and School Tuition Invoice**

Please calculate your total annual membership dues and school fees.

Number of Senior Members: \_\_\_\_\_ @ \$325      \$ \_\_\_\_\_

Number of Adult Members: \_\_\_\_\_ @ \$325      \$ \_\_\_\_\_

Number of Children enrolled in the  
Shoreshim School (grades K-6)      \_\_\_\_\_ @ \$450      \$ \_\_\_\_\_

Total Annual Membership Dues + School Fees:      \$ \_\_\_\_\_

\$25 Discount for Payments made in full by July 1st:      \$ \_\_\_\_\_

Total Dues and Fees:      \$ \_\_\_\_\_

Amount Enclosed for Dues and Fees:      \$ \_\_\_\_\_\*

Balance (50% of full payment due by due by September 15th):      \$ \_\_\_\_\_

Full Balance (All payments due by January 15<sup>th</sup>):      \$ \_\_\_\_\_

Optional Donations Enclosed:

General Fund:      \$ \_\_\_\_\_\*

Torah Fund:      \$ \_\_\_\_\_\*

Tzedakah Fund:      \$ \_\_\_\_\_\*

School Fund:      \$ \_\_\_\_\_\*

Reston Interfaith:      \$ \_\_\_\_\_\*

TOTAL ENCLOSED TODAY (add \* amounts):      \$ \_\_\_\_\_

Please make your check payable to "Shoreshim" and mail check and form to:

Shoreshim, P.O. Box 2516, Reston, VA 20195