



MEMBERSHIP APPLICATION

Please complete all information below. Please print clearly. Thank you.

Last Name _____ First Name _____ MI _____

Address _____ City _____ Zip _____

Home Phone () _____ Work Phone () _____ Cell Phone () _____

Birthday _____ E-mail _____ Occupation _____

Marital Status Single Married Divorced Widowed

Spouse's Name _____ Spouse's Birthday _____ Anniversary _____

TAE Brotherhood Annual Membership Dues are:

- FREE: 1st year waived for NEW Temple Adat Elohim members**
- \$36: New Member (not new to TAE)**
- \$36: Renewal for current or previous BH members**
- \$75: Non-TAE members**

Please make your check *payable to "TAE Brotherhood"* and send to the TAE office (address at bottom of this application)

Signature _____

For more information please contact:

Steve Forman at (805) 807-1908 or forman3d@hotmail.com

Please send this completed application form to:

Temple Adat Elohim Brotherhood
ATTN: Membership
2420 E. Hillcrest Drive
Thousand Oaks, CA 91362

Optional Donation

- \$10
- \$18
- \$25
- \$36
- \$50
- \$100
- \$180
- _____