



BNAI JACOB SHAAREI ZION CONGREGATION

6602 Park Heights Avenue Baltimore, Maryland 21215

Tel: 410-764-6810 Fax: 410-358-2631 E-mail: office @bjsz.org

Membership Information Form

*Please complete this form and include information for all family members as applicable.
Return the completed form by mail, fax it to the Shul office or email it to office@bjsz.org.*

Date: _____

Contact Information – Please Print

Names(s), including title(s): _____

Address: _____

City, State, Zip Code: _____

Home Telephone: _____ Business Telephone: _____

Add my name to the Shul E-Mail list: Yes ____ No ____

E-mail: _____

Family Information:

Please list legal name, Hebrew name, and date of birth of all family members residing at home:

Membership Dues: (July through June) please circle one

Family: \$650

Seniors: \$580

Young Member Discount:

Single: \$425

under 35 - \$425

Associate Membership: \$250

under 30 - \$325

