

## BEIT OLEH AMERICA NETANYA AACI MEMBERSHIP FORM

All membership information is confidential. Beit Oleh America and AACI use it to serve you better. Please complete this form as thoroughly as possible. (Please print in block letters)

**Membership rates:**

Family Annual - NIS 200      Single Annual - NIS 115  
 Family 5 Years - NIS 750      Single 5 Years - NIS 400  
 Special Rates for New Olim

Office use Only	
MID #:	
Membership Type:	
Amount Paid:	
Expiry Date:	
Date of Registration:	
Receipt Number:	

MALE		FEMALE	
Title (check one)	Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Rabbi <input type="checkbox"/>	Dr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms. <input type="checkbox"/> Miss <input type="checkbox"/>	
Last name			
First name			
Teudat Zehut #			
Home Address			
<i>House/Flat/Entrance#</i>		<i>Street</i>	<i>Neighborhood</i>
<i>City</i>		<i>Country</i>	<i>Zip</i>
Telephone #	Fax #	Mobile #	
E-mail			
Mailing address (if different):			
<i>PO Box:</i>		<i>Zip:</i>	<i>City:</i> <i>Country:</i>

### EMPLOYMENT INFORMATION

OCCUPATION	
RETIRED (Details)	
WORK PLACE	
Work phone number	
Work fax number	
E-mail	

## GENERAL INFORMATION

	MALE	FEMALE
Marital status: (check one)	Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widower <input type="checkbox"/>	Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widow <input type="checkbox"/>
Date of birth:		
Place of birth: (country)		
Year of arrival in Israel:		
Year of Aliyah		
Religious affiliation (circle one)	Orthodox    Conservative Reform        Unaffiliated Other	Orthodox    Conservative Reform        Unaffiliated Other
Number of children under 18:		
Date(s) of birth:		

**Are you interested in volunteering? Please tick what interests you.**

Office Administration	Office Administration
Computer	Computer
Making phone calls	Making phone calls
Library	Library
Coffee shop	Coffee shop
Advertising department	Advertising department
Programming	Programming
Music/Drama Groups	Music/Drama Groups
Other: (give details)	Other: (give details)

**Are you interested in being included in our blood donor mailing reminders?**

Yes/No	Yes/No
Emergency contacts (Israel)	
Name, Address, Phone number etc	

**If you live overseas, would you like to receive our monthly Newsletter?**

(At \$30 per annum to cover postal costs)    Yes/No

## AGREEMENT

Please register me/us as member of Beit Oleh America and Canada in Netanya (#58-00-828-2)	
Please register me as member of AACI (#58-00-1954-5)	
<b>Signature:</b>	<b>Signature:</b>