



# Mosaic Law Congregation



## Membership Application

2300 Sierra Blvd ☆ Sacramento, CA 95825 ☆ 916-488-1122 ☆ [www.MosaicLaw.org](http://www.MosaicLaw.org)

*B'ruchim Habaim. Welcome to Mosaic Law Congregation!* Since 1900, our Congregation has endeavored to be a place of comfort for all members. We hope you find membership an enriching experience and you are encouraged to participate in our many spiritual, educational, cultural and social action programs.

### First Applicant (please print clearly)

\_\_\_\_\_ Date

Mr.  Mrs.  Ms.  Mx.  Dr.  Other \_\_\_\_\_

\_\_\_\_\_ Last Name First Name

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_

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

Email: \_\_\_\_\_ Preferred Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Birthplace: \_\_\_\_\_

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

Gender:  M  F  NB: \_\_\_\_\_

Marital Status:  Married  Widowed  Single  Divorced  Partnership \_\_\_\_\_  
Anniversary Date (if applicable)

Religious Background:  Born Jewish  Jewish by Choice  Other \_\_\_\_\_

Tribe:  Kohen  Levi  Israel

Religious background in which you were raised:  
 Reform  Reconstructionist  Orthodox  Jewish unaffiliated  Conservative  Other \_\_\_\_\_

If Jewish by Choice: Date of Conversion \_\_\_\_\_ Congregation \_\_\_\_\_ City/State \_\_\_\_\_

Hebrew Name in English: \_\_\_\_\_

Parent 1 – English Name: \_\_\_\_\_ Hebrew Name in English: \_\_\_\_\_  
*Example: Rachel Leah bat Moshe HaKohen v' Sarah Freydel (Rachel Leah the daughter of Moshe (who is a Kohen) and Sarah Freydel)*

Parent 2 – English Name: \_\_\_\_\_ Hebrew Name in English: \_\_\_\_\_  
*Example: Shimon Tzvi ben Moshe v' Chaya Tova (Shimon Tzvi the son of Moshe and Chaya Tova)*

Ritual Skills:  Bar/Bat/B'nai Mitzvah Tutoring  Read Hebrew  Speak Hebrew  Lead Services

Additional Language Fluency:  
 Spanish  Russian  German  Yiddish  French  Other \_\_\_\_\_

Would you like to join a Havurah?  Yes  No (If yes, please complete form found on MLC website)

Please list relatives at Mosaic Law Congregation and your relationship: \_\_\_\_\_  
\_\_\_\_\_

Have you previously been a member of Mosaic Law Congregation? If so, when? \_\_\_\_\_

Most recent or current congregational affiliation: \_\_\_\_\_

**FIRST APPLICANT INTEREST**

*Please indicate your availability:*

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_ Friday \_\_\_\_\_ Weekends \_\_\_\_\_  
Mornings \_\_\_\_\_ Afternoon \_\_\_\_\_ Evenings \_\_\_\_\_

**Please indicate which areas are of interest to you:**

**Activities**

- Adult B’nai Mitzvah
- Cantillation
- Choir
- Hebrew Classes
- MLC Sustainability

**Standing Committees**

- Programming
- Education & Youth
- Facilities
- Finance & Budget
- Membership
- Security
- Men’s Club
- Sisterhood
- MLC 2030

**Programs**

- Family & Youth Services

**Your Skills**

- Buildings & Grounds
- Marketing & PR
- Musical Instrument/Singing

**Volunteer Groups**

- Assisting in Kitchen
- Building/Grounds Maintenance
- Driving Members to Services
- KOH Library
- Meals of Condolence
- MiSheberach Callers
- Nechama
- Office Volunteer
- Sisterhood Gift Shop
- Social Action/Team Isaiah
- Ushering
- Visiting Ill Members

**SECOND APPLICANT INTEREST**

*Please indicate your availability:*

Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_  
Thursday \_\_\_\_\_ Friday \_\_\_\_\_ Weekends \_\_\_\_\_  
Mornings \_\_\_\_\_ Afternoon \_\_\_\_\_ Evenings \_\_\_\_\_

**Please indicate which areas are of interest to you:**

**Activities**

- Adult B’nai Mitzvah
- Cantillation
- Choir
- Hebrew Classes
- MLC Sustainability

**Standing Committees**

- Programming
- Education & Youth
- Facilities
- Finance & Budget
- Membership
- Security
- Men’s Club
- Sisterhood
- MLC 2030

**Programs**

- Family & Youth Services

**Your Skills**

- Buildings & Grounds
- Marketing & PR
- Musical Instrument/Singing

**Volunteer Groups**

- Assisting in Kitchen
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- Meals of Condolence
- MiSheberach Callers
- Nechama
- Office Volunteer
- Sisterhood Gift Shop
- Social Action/Team Isaiah
- Ushering
- Visiting Ill Members

**Second Applicant (please print clearly)**

Mr.  Mrs.  Ms.  Mx.  Dr.  Other \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Last Name First Name

Address: \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
*If different from First Applicant*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
*If different from First Applicant*

Email: \_\_\_\_\_ Preferred Phone: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Birthplace: \_\_\_\_\_

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

Gender:  M  F  NB: \_\_\_\_\_

Marital Status:  Married  Widowed  Single  Divorced  Partnership \_\_\_\_\_  
Anniversary Date (if applicable) \_\_\_\_\_

Religious Background:  Born Jewish  Jewish by Choice  Other \_\_\_\_\_

Tribe:  Kohen  Levi  Israel

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Parent 2 – English Name: \_\_\_\_\_ Hebrew Name in English \_\_\_\_\_  
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Ritual Skills:  Bar/Bat/B'nai Mitzvah Tutoring  Read Hebrew  Speak Hebrew  Lead Services

Additional Language Fluency:  
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Please list relatives at Mosaic Law Congregation and your relationship: \_\_\_\_\_  
\_\_\_\_\_

Have you previously been a member of Mosaic Law Congregation? If so, when? \_\_\_\_\_

Most recent or current congregational affiliation: \_\_\_\_\_

### Children Living at Home:

(If more than four children, please use a separate sheet.)

#### Child #1

\_\_\_\_\_  
Last Name First Name

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Hebrew Name (in English): \_\_\_\_\_

Religious Background:  Born Jewish  Jewish by Choice  Other \_\_\_\_\_

Special Needs? (if yes, please describe) \_\_\_\_\_

Grade: \_\_\_\_\_ Current School: \_\_\_\_\_

Bar/Bat/B'nai Mitzvah?  Yes  No Date: \_\_\_\_\_ Parsha: \_\_\_\_\_

#### Child #2

\_\_\_\_\_  
Last Name First Name

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Hebrew Name (in English): \_\_\_\_\_

Religious Background:  Born Jewish  Jewish by Choice  Other \_\_\_\_\_

Special Needs? (if yes, please describe) \_\_\_\_\_

Grade: \_\_\_\_\_ Current School: \_\_\_\_\_

Bar/Bat/B'nai Mitzvah?  Yes  No Date: \_\_\_\_\_ Parsha: \_\_\_\_\_

#### Child #3

\_\_\_\_\_  
Last Name First Name

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Hebrew Name (in English): \_\_\_\_\_

Religious Background:  Born Jewish  Jewish by Choice  Other \_\_\_\_\_

Special Needs? (if yes, please describe) \_\_\_\_\_

Grade: \_\_\_\_\_ Current School: \_\_\_\_\_

Bar/Bat/B'nai Mitzvah?  Yes  No Date: \_\_\_\_\_ Parsha: \_\_\_\_\_

#### Child #4

\_\_\_\_\_  
Last Name First Name

Gender: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Hebrew Name in English: \_\_\_\_\_

Religious Background:  Born Jewish  Jewish by Choice  Other \_\_\_\_\_

Special Needs? (if yes, please describe) \_\_\_\_\_

Grade: \_\_\_\_\_ Current School: \_\_\_\_\_

Bar/Bat/B'nai Mitzvah?  Yes  No Date: \_\_\_\_\_ Parsha: \_\_\_\_\_



# Current Dues Schedule

Shomrim (Guardians)*	\$3,900.00
Family	\$2,600.00
Young Couple 27-32 yrs	\$1,650.00
Young Couple 23-26 yrs	\$860.00
Single >33 yrs	\$1,650.00
Young Single 27-32 yrs	\$480.00
Young Single 23-26 yrs	\$300.00
Young Single 18-22 yrs	\$36.00
Limited Income	\$1080.00
Associate Member**	\$500.00

**\*\*\*Each household is invoiced \$180 annually for a Security Assessment\*\*\***

\*Shomrim benefits include unlimited High Holiday tickets for household family members and one reserved parking place for the High Holidays and tuition- free MLC education programs for all household family members (excluding Bar/Bat/B'nai Mitzvah training).

\*\*Associate members receive all standard membership privileges except High Holiday tickets and full member voting privileges. Associate members must be full time members of another congregation. Please list your primary congregation:

Dues adjustment: Mosaic Law Congregation membership is open to all, regardless of means. If the dues schedule poses a substantial burden, you are encouraged to contact the Membership Committee to request a dues adjustment.

Building Fund: Members of 5 years or less are expected to contribute to the MLC Building Fund:

\$300.00 per year for 5 years  Other \$ \_\_\_\_\_

**I agree to pay dues in the amount of:**

\$ \_\_\_\_\_ (Pro-rated amount for \_\_\_\_\_ months at \$ \_\_\_\_\_ per month)

Mosaic Law Congregation offers several payment methods. Please choose the best option for you.

<p><b>Check Enclosed:</b></p> <p>1) <input type="checkbox"/> Pay in Full (Total amount) \$ _____ <b>OR</b></p> <p>2) <input type="checkbox"/> Initial Payment \$ _____ Bill me for balance \$ _____ <input type="checkbox"/> Monthly \$ _____ <input type="checkbox"/> Quarterly \$ _____</p>
<p><b>Electronic Funds Transfer (Please attach a blank, voided check):</b></p> <p>1) <input type="checkbox"/> Pay in Full (Total amount) \$ _____ <b>OR</b></p> <p>2) <input type="checkbox"/> Initial Payment \$ _____ Bill me for balance \$ _____ <input type="checkbox"/> Monthly \$ _____ <input type="checkbox"/> Quarterly \$ _____</p>
<p><b>Credit Card:</b></p> <p>1) <input type="checkbox"/> Pay in Full (Total amount) \$ _____ <b>OR</b></p> <p>2) <input type="checkbox"/> Initial Payment \$ _____ Bill me for balance \$ _____ <input type="checkbox"/> Monthly \$ _____ <input type="checkbox"/> Quarterly \$ _____</p> <p><b>Please note:</b> Mosaic Law Congregation pays a credit card processing fee of 3%. Your donations to cover this fee are appreciated.</p> <p><input type="checkbox"/> Processing Fee Donation \$ _____</p> <p><input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express</p> <p>Credit Card # _____</p> <p>Expiration Date _____ 3 or 4-digit Security Code _____ Billing Zip Code _____</p> <p>Your signature reflects your personal commitment as well as your authorization for credit card or electronic funds transfers (if applicable)</p> <p>_____ Signature and Date</p>

**First Applicant**

**Second Applicant**

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Name (please print)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date