Sisterhood Membership Enrollment Form for 5784 (2023-2024)

Please fill out and return this form to Temple Beth El, 1489 Hamilton St., Somerset, NJ 08873, along with your check made out to "Temple Beth El Sisterhood".

NAME			
ADDRESS			
PHONE	EMA	.IL	
Current Temple member	: yes no		
Dues for this year are \$	45		
Amount enclosed			
Please consider volunte items below that intere			od activities successful. Check the
	<u>SISTERHO</u>	OOD VOLUNT	EER FORM
= -			onsider giving your time. Many hands continue the following programs.
Rummage Sale or Clothin	g Drive (3 times :	a year):	
Gift Shop (operating sche	dule varies):		_
Hamantashen baking (1 t	ime a year):		<u> </u>
Purim Baskets (1 time a y	vear):		_
Oneg Set-up (Friday after	rnoons):		_
Membership:			_
Sisterhood Shabbat:			_
Fund Raising:			_
High Holiday Greetings (A	August-Septembe	<u>er):</u>	_
Paid up Dinner/Brunch:			_
Education & Programmin	ıg:		