KJBS Membership Form

In an effort to update the shul membership please fill out the enclosed form and return it to the office or fill out the form being sent out via email. This information will be vital in helping to asses the various ages of both youth and adult in order to help create and initiate new programs and events.

A) **Name:**

Last: _____

First: _____ _____

Birthdates: _____ _____ Anniversary:_____

Email address(es)

_____

_____

B) **Address:**

_____

_____

C) **Children**

Name	**Birthday (mm/dd/yyyy)**	**Current School (Nursery–grad school) or Current Occupation/location**