



MEMBERSHIP COMMITMENT FOR June 1, 2024 - May 31, 2025				
Name:				
Address:		City		Zip
Phone:		(Home or Cell?) Birth Month:		(recognized in eSchmooze)
Email:				
		☐ New Member	☐ Temple SI	halom Member
MEMBERSHIP OPTIONS (PLEASE CHOOSE ONE):			THERE ARE MANY WAYS TO HELP! CHECK YOUR INTERESTS:	
	Sarah \$50	\$	I would like to	be of service in:
	Rebecca \$75	\$	☐ Baking for E	
	**Rachel \$100 (includes Little Sisters)\$		☐ Community Service	
	**Leah \$180 (includes Little \$,	☐ Decorating for	or Events Wine & Cheese Prep
	•	,	☐ Host an ever	•
	**Esther \$360 (includes Little S		☐ Mahjongg To	•
u	Little Sisters \$10 each #		■ Make Meals	for a Sick Member
Little Sister Name(s):			☐ Phone Calls to Members	
Shop!			□ Social Justic	
	ADDITIONAL OPTIONAL	ONS	☐ Other ways I	ift Shop Volunteer
	Give the Gift of Membership (\$50 e	ach) \$	- Curier ways i	r carr neip.
	WRJ YES Fund Donation (\$18 sugg			
	TOTAL	\$		
PAYMENT OPTIONS:				
	☐ Enclosed my check payable to: Temple Shalom Sisterhood			
	Credit card: Card #			
Exp. Date: CVV Code:				
or register online: templeshalomdallas.org/sisterhood-membership-registration/				
Please return this form with payment to:				

Temple Shalom Sisterhood, Attn: Membership • 6930 Alpha Road • Dallas, TX 75240 • 972-661-1810

Questions? Contact: Membership VP, Ilene Zidow - ilene.zidow@gmail.com or 972-523-6231