

temple beth david
of the san gabriel valley

בית דָּוִד

[Alan R. Lachtman](#), Rabbi

Jan Robertson & Arlene Bailey, Executive Council

[Orly Campbell](#), Cantor

[Gal Kessler Rohs](#), Ed. Dir.

Dear Prospective Member:

Thank you so much for your interest in Temple Beth David. Over seventy years ago, Temple Beth David was established as the first Reform congregation in the San Gabriel Valley. Today, we are the only Reform congregation in the West San Gabriel Valley. We take pride in our history and even greater pride in our dedication to serve future generations of Reform Jews. We are affiliated with the [Union for Reform Judaism](#).

This packet offers only a glimpse of our congregation and its wonderful programs. We encourage you to visit Temple Beth David and experience the warmth of our community. Please stop by to meet our members of all ages, our spiritual leaders and teachers, our dedicated [volunteers](#), and our [staff](#).

Come join us at [Friday evening Shabbat services](#) for thoughtful prayer, uplifting music, and delicious oneg to rejuvenate you. Or try our other religious services, Torah study sessions, [adult education classes](#) or our Mitzvah projects such as [feeding the hungry](#), [caring for seniors](#) and [animals](#), and more.

If you have children, you may bring them to visit our [religious school](#) on a Sunday morning, or Friday afternoons during the school year. Check [David's Word](#), on our website, or get on the e-mail blast for upcoming events that you might wish to attend.

Please do not hesitate to contact our office at (626) 287-9994 for more information about becoming part of our family by becoming a member.

Thank you again for your interest. We hope to see you soon at Temple.

Shalom,

Rabbi Alan R. Lachtman
hoyvey@aol.com

Cantor Orly Campbell
cantor@templebd.com

Jan Robertson, Executive Council
Arlene Bailey, Executive Council

Gal Kessler Rohs, Education Director
gkrohs@templebd.com

Adele Guerra, Administrator
office@templebd.com

Temple Beth David

Temple Beth David - Revised 8-23-20



Worship

Shabbat Services

Friday nights, 7:30 p.m.

Special Services Include: Family Services Including Dinner, Musical Services, Tot/ Young Family Services, Sisterhood, Classic Reform, Meditative, Interfaith, and more!

High Holy Days

Joint S'lichot Community Services, Erev Rosh Hashanah, Children's and Adult Morning Services, Kol Nidre, Yom Kippur

Festivals

Chanukah, Pesach, Purim, Simchat Torah, Sukkot - parties, dinners, music- fun for the whole family!

Learn

Religious School

Pre-kindergarten through 12th grade

Contact: Gal Kessler Rohs, Education Director
gkrohs@templebd.com

Ulpan Shabbat - Shabbat and Hebrew interactive experiences for children of all ages, includes dinner!

B'nai Mitzvah Training

Available for Children and Adults

Confirmation (10th grade)

Taught by Rabbi, Educator and Cantor

Adult Education

Bagel Breakfasts, Classes with Clergy

Library

Connect

Sisterhood

Open to all women of the congregation
Contact Sisterhood President: Carol Ozer
tbdSisterhood18@gmail.com

TBD Youth Group

Contact Madison Schoonmaker
TBDSGVYouthGroup@gmail.com

Men's Club

Contact Bill Joseph
mailto:bjoseph@kiddermathews.com

Mindfulness Meditation Group

Contact Victor Herzfeld
vicswire@pacbell.net

High Holy Days Choir

With Collaboration to Jewish

Federation of SGPV

- Jewish Book Month - events held at TBD and throughout the area
- Shabbaton -weekend in early spring for 3rd-9th grades
- Camp Gan Shalom - summer day camp - scholarships available

Other Programs Include

- Family Fun Night- auctions and bingo!
- Programs and concerts
- Social club - Chaverim
- Movie nights

Volunteer

Foothill Unity Center – Food Bank

Congregants donate food, money, and coupons, aid in distribution to families in need year-round

Union Station – Feeding the Hungry

3rd Sunday of each month, 7-10 am

Membership Agreement

Date: _____

Name(s): (Mr./Mrs./Ms./Dr.) _____
First Name Last Name

(Mr./Mrs./Ms./Dr.) _____
First Name Last Name

Child name: _____ Age : _____

Child Name: _____ Age: _____

For additional children, please add to the "Membership Application" form

Please refer to the "Temple Beth David Membership Fees Information" sheet for the amounts due. A separate "Religious School" packet should be completed and returned to the office for children attending Religious school or Hebrew school.

	Current Year	Payment enclosed	Balance due
2020 <u>New</u> Family Dues:	_____	_____	_____
Family: \$1000.00	Jan 1-Dec. 31		
Single: \$500.00			
2020 Single Membership	_____	_____	_____
Annual: \$1250	Jan 1-Dec. 31		
2020 Family Membership	_____	_____	_____
Annual : \$2500	Jan 1-Dec. 31		
2020 Sustaining Membership	_____	_____	_____
Annual : \$3000	Jan 1-Dec. 31		

Please return this application and payment of no less than one quarter of the first year's total dues to the TBD office.

_____ Please find check enclosed made payable to: Temple Beth David

_____ Please debit my credit card for auto-pay on the 1st of each month (com credit card authorization form)

_____ Please charge my credit card: _____ Visa _____ MasterCard

Account # _____ Expiration Date _____

Signature _____ Amount: _____

Balance will be paid monthly or quarterly and is due by Dec. 31 each year. Dues and fees are subject to change on Jan. 1 of each year. The Finance Committee must approve special dues arrangements.

_____ We agree to pay annual membership dues as stated on the “Temple Beth David Membership
initial Fees” sheet.

Applicant’s Signature

TBD Membership Chair Signature

Temple Beth David Membership Fees Information

Contributions for Temple dues, building fund pledges, and Religious School fees mean that Temple Beth David can keep its doors open to serve Reform Jews in the San Gabriel Valley. The financial contributions of past generations of members have sustained our congregation for over 70 years. We welcome you in continuing that important effort for future generations. Both dues and Building Fund contributions are considered tax deductible.

Please Note: If you cannot afford to pay full dues we still want you as a Temple member. Our Finance Committee will work with you to make special arrangements for dues and fees. Please contact the Temple Office (626-287-9994), for referral to the Finance Committee to explore membership options.

	First Year Of Membership	Second year of Membership	Third Year Of Membership
Family Membership*	\$1000	\$\$2500	<i>Regular Membership Dues (currently \$2500)</i>
Single Membership**	\$500	\$1250	<i>Regular Membership Dues (Currently \$1250)</i>

*Family membership is defined as one or two adults and their dependents, if any. As Temple Beth David has always welcomed interfaith families, all couples are considered a family unit.

** Single membership is defined as an unmarried individual.

Temple dues may be changed by action of the board of directors of Temple Beth David.

Before joining our congregation, new members are expected to have fully discharged their financial obligations to any congregation with which they may have been previously affiliated. Membership dues include Union for Reform Judaism (URJ) membership. Temple Beth David is affiliated with the URJ, which provides invaluable services to its member congregations while representing Reform Judaism across the United States.

Temple Beth David also accepts Visa, MasterCard card for all payments of dues, fees and pledges.

For Office Use

Temple Beth David
Membership Application
9677 E. Longden Ave., Temple City, CA 91780
(626) 287-9994

Account Code _____
 Membership Date ___/___/___

All information is kept CONFIDENTIAL
 PLEASE PRINT

Today's date: ___/___/___

	<i>Adult #1</i>	<i>Adult #2</i>
Title you prefer:	Dr Mr Mrs Ms Miss None Other _____	Dr Mr Mrs Ms Miss None Other _____
First name	_____	_____
Last name	_____	_____
Hebrew name (if known) (Use English lettering)	_____	_____
Sex	Male Female	Male Female
Home Address	_____ _____	_____ _____
Home Phone	_____	_____
Date of birth	_____	_____
Place of birth	_____	_____
Marital status	Married Never married Divorced Separated Widowed Domestic Partnership	Married Never married Divorced Separated Widowed Domestic Partnership
Wedding anniversary	_____/_____/_____	

Adult #1

Adult #2

Employment

Occupation	_____	_____
Title	_____	_____
Employer	_____	_____
Work Address	_____	_____
	_____	_____
Work phone	_____	_____
Cell Phone	_____	_____
Fax	_____	_____
Home Email	_____	_____
Work Email	_____	_____

Children

Name	_____	Sex	_____	Date of Birth	____/____/____	Grade	_____
	_____	Sex	_____	Date of Birth	____/____/____	Grade	_____
	_____	Sex	_____	Date of Birth	____/____/____	Grade	_____
	_____	Sex	_____	Date of Birth	____/____/____	Grade	_____
	_____	Sex	_____	Date of Birth	____/____/____	Grade	_____
	_____	Sex	_____	Date of Birth	____/____/____	Grade	_____

Yahrzeit Information

Do you wish to observe Date by (Gregorian or Jewish?)

Name of Deceased	Relation	G/J	Date of Death (English)
_____	_____	____	_____
_____	_____	____	_____
_____	_____	____	_____
_____	_____	____	_____
_____	_____	____	_____
_____	_____	____	_____
_____	_____	____	_____

I would like to know more about the following programs:

	Adult # 1	Adult #2
Adult Education Courses	_____	_____
Adult Hebrew Instruction	_____	_____
TOV CHAI Youth Group	_____	_____
Choir: Adult & Youth	_____	_____
Jewish Camp Scholarship	_____	_____
Men's Club	_____	_____
Outreach	_____	_____
Sisterhood	_____	_____
Volunteering	_____	_____

Synagogue Involvement Opportunities

Adult Education	_____	_____
Choir: Adult & Youth	_____	_____
Community Relations	_____	_____
Cooking/Baking	_____	_____
Driving	_____	_____
Fund Raising	_____	_____
Hospitality	_____	_____
Jewish Camp Scholarship	_____	_____
Library	_____	_____
Membership	_____	_____
Outreach/Interfaith	_____	_____
Religious School	_____	_____
Ritual Committee	_____	_____
Service Participation	_____	_____
Singles Programming	_____	_____
Social Action	_____	_____
Social Club	_____	_____
Temple Dinners	_____	_____
Ushering	_____	_____
Visiting Shut-ins	_____	_____
Youth Activities	_____	_____
Other	_____	_____

Religious Tradition

Are you:	Born Jewish Jewish by Choice Non-Jewish	Born Jewish Jewish by Choice Non-Jewish
	_____	_____
	Denomination	Denomination
Extent of Jewish education	Bar/Bat Mitzvah Confirmation Hebrew High School College Graduate School None Prayer Book Fluent No	Bar/Bat Mitzvah Confirmation Hebrew High School College Graduate School None Prayer Book Fluent No
Do you own a cemetery plot?	No Yes -- Location	No Yes -- Location
	_____	_____