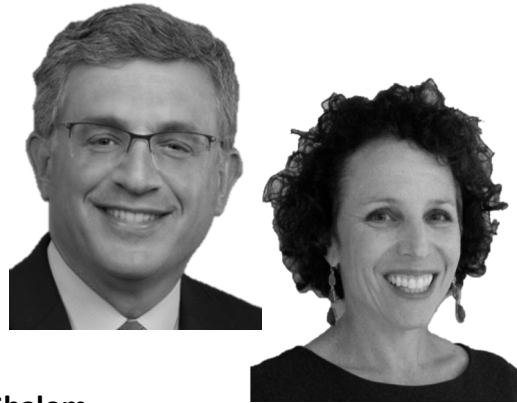


# Welcome

So Glad You  
Are Connecting  
with Us

The Jewish  
Congregation of Venice  
connects Jewish tradition  
with the Jewish future.  
We **encourage** member  
participation in services.  
We **celebrate** with our  
choir and traditional  
music as part of worship.  
We **engage** in  
community relationships,  
interfaith relationships,  
fellowship and outreach.  
We **share** interests and  
friendships: Sisterhood,  
Men's Club, Social  
Activities and Chavurah.  
We **embrace and  
welcome** members,  
guests and friends.



Shalom,

The Jewish Congregation of Venice is a vibrant, welcoming community, a place of Jewish belonging. While we value tradition, we also consider contemporary ideas. We are a community where you explore Jewish teaching and practice, and a place where friends and families learn together. People are drawn to the special feel of our community and bring their broad range of backgrounds to share.

We invite you to spend time with us at Friday night Shabbat services followed by an oneg, come to a family program or rediscover your Jewish heritage.

We look forward to seeing you soon.  
**Rabbi Benjamin Shull and  
Cantor Marci Vitkus**



600 N. Auburn Road  
Venice, FL 34292  
941-484-2022

[jcvenice2@gmail.com](mailto:jcvenice2@gmail.com)  
[www.jewishcongregationofvenice.org](http://www.jewishcongregationofvenice.org)

# Membership Application

July 1, 2019  
through June 30, 2020



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Venice, FL 34292  
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# The Jewish Congregation of Venice

## Membership Application

Office use only

Date Received: \_\_\_\_\_

Payment Received: \_\_\_\_\_

Applicant #1

Name: \_\_\_\_\_

(Please circle: Mr., Dr., Mrs., Ms. )

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

(circle preferred contact number)

Cell#: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Other Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

(if retired, previous occupation)

Hebrew Name, if known: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact #: \_\_\_\_\_

Marital Status:  Married Marriage date: \_\_\_\_\_  Single

I/we would like to join at the following \*Membership Level:

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant #2

Name: \_\_\_\_\_

(Please circle: Mr., Dr., Mrs., Ms. )

Local Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone #: \_\_\_\_\_

(circle preferred contact number)

Cell#: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Other Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

(if retired, previous occupation)

Hebrew Name, if known: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact #: \_\_\_\_\_

Divorced  Widow/Widower  Domestic Partner(s)

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**\* A NOTE ABOUT JCV MEMBERSHIP - The JCV offers two levels of membership:**

**1. Full Time Membership:** Entitles members to participate in all of our services, including High Holy Days tickets.

**Annual dues are:** (a) \$700.00 per person or (b) \$1400.00 per couple

**2. Seasonal Membership:** Entitles members who are in Florida seven months or less to utilize all JCV services, excluding High Holy Days tickets.

**Annual dues are:** (a) \$400.00 per person or (b) \$800.00 per couple

*Membership dues may be paid annually or semi-annually. At least one-half must be paid by September 1 to receive High Holy Days tickets. Special arrangements can be made with the JCV Treasurer. Mail or bring your check and reservation form to: Jewish Congregation of Venice, 600 N. Auburn Road, Venice, FL 34292. Please make the check payable to the JCV and mark it "Membership."*