

# ADATH EMANU-EL FEDERATED TEMPLE YOUTH

205 Elbo Lane  
Mt. Laurel, NJ 08054  
856-608-1200

## AEFTY MEMBERSHIP APPLICATION FOR 2011-2012

For Grade 9-12

Please check one:

Dues: \$40.00 for Synagogue members.

Dues: \$60.00 for non-Synagogue members.

I, \_\_\_\_\_ (parent/guardian) give permission for my child,  
\_\_\_\_\_, to participate in AEFTY activities, and to be  
transported to certain events by selected chaperone during the 2011-2012 year.

I WOULD \_\_\_/WOULD NOT \_\_\_ be interested in attending youth group events as a chaperone.

\_\_\_\_\_  
Signature of member

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent

\_\_\_\_\_  
Date

### PLEASE COMPLETE THE FOLLOWING:

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

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

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

**Applicant's** Email: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ **Applicant's** Cell Phone \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Birthday: \_\_\_\_\_

**Please check the preferred way to communicate with you:**  text  e-mail  
 facebook OR  call (home or cell) circle one

Check here if you do not want your child's picture to appear on our website or in AEFTY/Adath Emanu-El printed media.

*Please return this application with annual dues to the Synagogue Office or to:*

AEFTY

205 Elbo Lane

Mt. Laurel, NJ 08054

*(checks payable to AEFTY)*

**Join us at FACEBOOK.COM/AEFTY to stay updated!**