

# Congregation Anshei Israel

## Senior USY Membership Form

5550 EAST FIFTH STREET - TUCSON, ARIZONA 85711  
(520) 745-5550 ext.222 - FAX (520) 745-9058 -Youth Center 745-5550 ext. 241

### 2011 - 2012

Please fill out this form completely and check appropriate spaces. Be sure to enclose a check for dues when returning this form to the office at Congregation Anshei Israel. Checks can be made payable to Congregation Anshei Israel USY.

**Please fill out one form per child.**

PLEASE PRINT NEATLY

Name \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_ Birthday \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Childs Phone \_\_\_\_\_

Child's e-mail address \_\_\_\_\_ @ \_\_\_\_\_

Father's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cellular \_\_\_\_\_

Father's Hebrew Name \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work Phone \_\_\_\_\_ Cellular \_\_\_\_\_

Mother's Hebrew Name \_\_\_\_\_

Member of Congregation Anshei Israel Yes \_\_\_\_\_ No \_\_\_\_\_  
Member of another Congregation Yes (which one) \_\_\_\_\_ No \_\_\_\_\_

### EMERGENCY INFORMATION

**Do Not Use Parents' Name**

Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Phone \_\_\_\_\_ Cellular \_\_\_\_\_ Pager # \_\_\_\_\_

Special Medical Problems \_\_\_\_\_

- My child's name **may**  **may not**  be included in the school publications or publicity with their photo .
- My child's image **may**  **may not**  be used in any synagogue publicity.
- My child **may**  **may not**  be photographed or videotaped at school or during school activities. This included electronic images to be published in school publication, local media or electronic media. This also means my child will not appear in CAI websites or printed material.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

### YEARLY DUES

GROUP	GRADES	CAI- MEMBERS	NON-CAI MEMBERS
Kadima	4 -5- 6	\$60.00	\$ 80.00
Junior USY	7-8	\$75.00	\$100.00
Senior USY	9-10-11-12	\$75.00	\$100.00

**No Jewish child will be turned away from our Youth Program for financial reasons**