THE GREAT SYNAGOGUE SYDNEY

ק"ק בית ישראל

GREAT SUPPORTER APPLICATION

Thank you for becoming a Great Supporter of our historic shule.

Please complete this form and return it to the Administrator, The Great Synagogue, 166 Castlereagh St, SYDNEY 2000

or scan and email it to admin@greatsynagogue.org.au

Please feel free to call Susan Bures on 9267 2477 for any further information you may need

YOUR DETAILS

Title: _____ Surname: _____ First Name/s: _____

Hebrew Name: _____ ben/bat _____

Cohen, Levite or Israelite (circle one)

Mailing Addess: _____ Postcode: _____

Phone: (after hrs) _____ Phone: (bus. hrs) _____ Business Suburb: _____

Mobile: _____ Email: _____

Date of birth: _____ / _____ / _____ Marriage Date / Place: _____

YOUR SPOUSE

Title: _____ Surname: _____ First Name/s: _____

Hebrew Name: _____ ben/bat _____

Cohen, Levite or Israelite (circle one)

Phone: (after hrs) _____ Phone: (bus. hrs) _____ Business Suburb: _____

Mobile: _____ Email: _____

Date of birth: _____ / _____ / _____

YAHRZEITS

(please include any family for our community records)

English Name	Hebrew Name	Relationship to you	Date of Passing