

Application for Membership

1/4

Personal Data

Member Nr. _____
for internal use only

Name _____ Jewish Name _____
 Maiden Name _____ Jewish Name Father _____
 First Name _____ Jewish Name Mother _____
 Street _____ Cohen Levy Israel
 ZIP/City _____ Tel. P. _____
 Date of Birth _____ Tel. O. _____
 Time of Birth _____ Mobile _____
 Place of Birth _____ E-Mail _____
 Citizen _____ Profession _____
 Marital Status _____ Social security number _____
 Domiciled in Zurich since _____
 Former Domicile _____ until _____
 Up to now member of Jewish Community _____

Partner

Name _____ Jewish Name _____
 Maiden Name _____ Jewish Name Father _____
 First Name _____ Jewish Name Mother _____
 Date of Birth _____ Cohen Levy Israel
 Time of Birth _____ Tel. P. _____
 Place of Birth _____ Tel. O. _____
 Citizen _____ Mobile _____
 Profession _____ E-Mail _____
 Social security number _____
 Jewish Non-Jewish

For applicants converted to Judaism

2/4

Converted to Judaism on _____ Place _____

By Rabbi _____

Parents

Of applicant (m)

Name/First Name Father _____

Name/First Name Mother _____

Of applicant (f)

Name/First Name Father _____

Name/First Name Mother _____

Marriage Ceremony Place/Date

Civil Marriage/Place _____ Date _____

Jewish Marriage/Place _____ Date _____

Rabbi of marriage ceremony _____

Children

Family Name	Boy / Girl	First Name	Jewish First Name	Date of Birth
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____
_____	<input type="checkbox"/> <input type="checkbox"/>	_____	_____	_____

We would like our children to attend following ICZ institutions:

Ganon Kindergarten Nursery Religion class

Yahrzeit

3/4

Father _____ Mother _____
Brothers / Sisters _____ Children _____
Further persons _____

Seat in Synagogue

I/we am/are interested to get a seat in the Synagogue. Please put me/us on the waiting list.

Men Women

I/we would like to subscribe to following mail services:

ICZ Mailings Mailing Death Event Dispatch of Kosher List
Kosher Updates Loewenblatt
(Weekly Parasha in German)

Remarks

Documents

- We kindly ask applicants who did not grow up within the ICZ to attach a proof of their Jewish origin. (e.g. copy of K'tuba or K'tuba of parents).
- If you are or were already a member of another Jewish community, we ask you to add a membership confirmation and/or cancellation of this community.

- For the creation of a personal ICZ member card, we ask you to add a photo to this application form

Signatures

4/4

With our signatures

1. we **recognize** the statutes and regulations of the ICZ.

(The statutes and regulations can be consulted in the ICZ secretariat during the opening hours (Mon to Thu 8 am to 5 pm, Fri and eve of Jewish Holidays 8 am to 2 pm).

2. we **authorize** the ICZ to have an **insight into our personal tax register**.
3. after a successful application, we **authorize** the ICZ to inform the **residents office** of our municipality of our membership. This is valid only for members living in the Canton of Zurich.
4. we **confirm** having taken knowledge that no financial support can be claimed with the Community's social department during a **period of 5 years** from the date of admission to membership on.
5. in case our child/children would visit or visited the ICZ Ganon/Kindergarten, we **undertake** to remain members of the ICZ **for a minimum of 5 years** after our youngest child has ended his kindergarten time and to pay the due ICZ taxes. Otherwise the full costs of ganon or kindergarten will have to be refunded as follows:

- Ganon fees (actual full costs 10'000.00 CHF per year and child)
- Kindergarten fees (actual full costs of 15'000.00 CHF per year and child)

This commitment is not applicable with an officially confirmed departure from Switzerland.

6. we **accept** the **solidary liability** for financial expenses of all kinds (relevant for couples).

The signature of **both** partners is indispensable also for an interreligious partnership, as according to §6/2 of the statutes, the membership of a person married to a non-Jewish partner can only be effected with the written commitment by his/her partner of the solidary liability for financial expenditures.

7. we **take knowledge** that according to §8 of the statutes the board of the ICZ can define an **admission fee** for applicants who have passed the age of 30 years.

Signature of applicant:

Date _____ Signature _____

Signature of partner:

Date _____ Signature _____

For internal use only

Visa Rabbi _____ Visa Executive Director _____

Date _____ Date _____