



B'nai Shalom

Morris & Miriam Hammer Campus

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DUAL MEMBERSHIP RENEWAL FORM 2008-2009

(Sheet 2 of 2)

Name _____

Please provide the contact information for the CONSERVATIVE synagogue that you are maintaining your dual membership with so that we may coordinate with them.

Name of Synagogue _____

Address _____

City _____ State _____ Zip _____

Telephone _____