

KENESSET ISRAEL TORAH CENTER



Join us—Become a member

Membership application can be found inside.

**Keneset Israel Torah Center
A Member of the Union of Orthodox Jewish
Congregations of America**

1165 Morse Avenue, Sacramento, CA 95864
Postal Address: P.O. Box 255503,
Sacramento, CA 95865

Phone/ Fax: (916) 481-1159
Website: www.kitcsacramento.org
E-Mail: rabbibailey@gmail.com

KITC is a warm and eclectic centrist Orthodox synagogue. KITC was established in 1983 and currently has an active membership of approximately 80+ families.

Rabbi: Ian Bailey

Mikveh:

Phone: Women (916) 481-1158
Men & for immersion of utensils (916) 481-1159

Services:

Shacharit Weekdays—6:45 a.m., Sunday 8:30 a.m., Shabbat and public holidays 9:00 a.m.

Mincha (Summer only) & Ma'ariv—8:00 p.m.,(combined with Chabad at 945 Evelyn Ln)

Youth: NCSY program run in conjunction with the O-U youth advisory located in the Bay Area. Shabbat Morning Programs for children, Sunday morning Kid's Minyan

Education: Chumash Class, Gemara (Talmud) Class, Judaism on Two Feet, Modern Hebrew Class, Bar/Bat Mitzvah Preparation

Application for Membership to Keneset Israel Torah Center

All applicants will meet with the Rabbi, prior to becoming members.

Name(s): _____ **Telephone:** _____

Address: _____

Email Address: _____

Hebrew Name: _____ **ben/bat:** _____

Hebrew Name of Spouse: _____ **ben/bat:** _____

Hebrew Names of Parents: _____ **ben** _____ **bat** _____
FATHER MOTHER

Hebrew Names of Spouse's Parents: _____ **ben** _____ **bat** _____
FATHER MOTHER

Anniversary: _____

Children's Names: _____
English Hebrew Birthdate

I am hereby applying for membership in Keneset Israel Torah Center and the Union of Orthodox Jewish Congregations of America and agree to abide by the rules and by-laws thereof

Signature(s) Date

Membership Dues: Full family membership \$1200/year, Full single membership \$600/year, Associate membership (for those who are currently full members of another congregation) \$300/year.

When applying for Associate Membership, please provide the name of the synagogue where you currently have primary membership. Name of Synagogue: _____

Any questions should be directed to the Membership Chairperson or the President at 481-1159.
Special arrangements for dues payment in the case of hardship may be made with the President at 481-1159