

Rabbinic Pastors Association (RPA)

Initial Membership Application for Rabbinic Pastors*

If at OHALAH, please give your check and application to Rabbinic Pastor David Daniel Klipper. Otherwise, please mail the completed application with your check, made out to the Rabbinic Pastors Association, to Rabbinic Pastor Simcha Raphael, 1211 Ansley Avenue, Melrose Park, PA 19027. Please print legibly or type.

GENERAL INFORMATION

Name: _____

Hebrew Name: _____

Home address: _____

City State/Province Zip/Postal code Country

Work address: _____

Name of employer

Street address or post office box

City State/Province Zip/Postal code Country

Where do you prefer we send RPA correspondence (home or work)? _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Fax No. _____

E-mail address: _____

Type of Membership:

Full: ____ Student: ____ Dual: ____ (Note: Dual membership is only open to individuals who belong and pay dues to OHALAH as well as the RPA.)

Dues Schedule

	<u>Full</u>	<u>Student</u>	<u>Dual</u>
<u>Annual income:</u>	<u>Dues:</u>	<u>Dues:</u>	<u>Dues:</u>
Over \$100,000	\$216	\$144	\$36
\$66,001 to \$100,000	\$162	\$108	\$36
\$36,001 to \$66,000	\$108	\$72	\$36
\$36,000 and under	\$54	\$36	\$36

ORDINATION

- If you filled out a subscription form to OHALAH in the past, then your membership will be deemed to start at that time. This application is so that we can have current information about you in the RPA files.

Please attach a copy of your *smicha* document. If you have separate Hebrew and English documents, please attach both. If you are a graduate of the Chaplaincy School at AJR/CA's chaplaincy program, please submit evidence of graduation.

RECOMMENDATIONS

Please obtain a recommendation regarding your membership. If possible, this should be from someone known to Rabbinic Pastor Association members. You may also utilize Rabbinic Pastor Shulamit Fagin or Rabbinic Pastor David Daniel Klipper at dklipper@stamhealth.org or daviddaniel@klipper.us in support of your application.

Name: _____

PROFESSIONAL ASSOCIATIONS

1. Do you belong to any professional associations? _____

If so, which one(s)? _____

2. Have you ever been denied membership in a professional association to which you have applied? .

3. Have you ever been suspended, expelled, placed on probation or been subject to other disciplinary action by a professional association for any reason other than the non-payment of dues? _____

If you answer yes to question 2 or 3, please explain on a separate sheet.

My answers to the above questions are true and correct to the best of my knowledge. I hereby agree that I am bound by and will comply with the OHALAH ethics policy as it is presented at <http://www.ohalah.org/guidelines/OHALAHEthicsPolicy.pdf>.

Signature

Date

See top of page 1 for where to send this application.