



Tahara Volunteer Form

Thank you for your interest in joining our Hevra. Please complete this form to be considered for a Tahara team in the future. If you've not received your Hep B vaccination, please let us know when you do and you will be put on the Tahara Roster

Name _____

Email _____

Phone _____

Address _____

Which Temple, JCC or other association are you affiliated with _____

Date of Funeral Home training _____

Availability (Ex; Evening, Day, Flexible) _____

Have you gotten your Hep B vaccination? _____

Note: Only the first of the three are required to perform a Tahara

Comments _____

Areas of interest

- Tahara volunteer
- Educational materials writer
- Educator
- Tahara coordinator
- Training coordinator
- Librarian
- Publicity/PR lead
- Google drive administrator