

## FAMILY

### Children living at home:

Name _____	Birth Date _____	School/Grade _____
Name _____	Birth Date _____	School/Grade _____
Name _____	Birth Date _____	School/Grade _____

### Children away:

Name _____	Age _____	Phone _____	Marital Status _____
Name _____	Age _____	Phone _____	Marital Status _____
Name _____	Age _____	Phone _____	Marital Status _____

### Other adults at home:

Name _____	Relationship _____
Name _____	Relationship _____

Are there special needs in your family of which we should be aware?

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### Emergency Contact:

_____	Relationship _____	Phone _____
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## Yahrzeit Information

Name	Relationship	Date of Death	After Sundown
_____	_____	_____	YES / NO
_____	_____	_____	YES / NO
_____	_____	_____	YES / NO
_____	_____	_____	YES / NO
_____	_____	_____	YES / NO

## Cemetery Information

MEMBER 1

I have made arrangements at a cemetery

Cemetery name/location \_\_\_\_\_

I have made other arrangements

Please describe \_\_\_\_\_

MEMBER 2

I have made arrangements at a cemetery

Cemetery name/location \_\_\_\_\_

I have made other arrangements

Please describe \_\_\_\_\_

## CONGREGATIONAL INVOLVEMENT

Our covenant of membership includes our members' involvement in the life and activities of the Temple. Please place a check beside the activities in which you have some interest. Partners may show different areas of interest by checking boxes designated for Members A and B.

<b>A B</b>	<b>A B</b>	<b>A B</b>	<b>A B</b>
<input type="checkbox"/> <input type="checkbox"/> Adult Education	<input type="checkbox"/> <input type="checkbox"/> Men of Kol Ami	<input type="checkbox"/> <input type="checkbox"/> Women of Kol Ami	<input type="checkbox"/> <input type="checkbox"/> Membership
<input type="checkbox"/> <input type="checkbox"/> Budget/Finance	<input type="checkbox"/> <input type="checkbox"/> 20s /30s Specific	<input type="checkbox"/> <input type="checkbox"/> Social Action	<input type="checkbox"/> <input type="checkbox"/> Ritual
<input type="checkbox"/> <input type="checkbox"/> Mitzvah Corps	<input type="checkbox"/> <input type="checkbox"/> SOVA Volunteer	<input type="checkbox"/> <input type="checkbox"/> Party/Gala Planning	

## DUES PLAN

### DUES AS A SOURCE OF FUNDING:

Congregation Kol Ami is a non-profit religious institution belonging to its membership. The primary source of funding for the congregation's programs is derived from the dues contributed by its members. The member leadership conducts the business affairs of the Temple in consultation with the Rabbi and the Executive Director. Through careful planning and review, the costs of operation are held to a minimum and are comparable to similar costs of other congregations in urban areas throughout the country.

### DUES STRUCTURE:

Our current dues model consists of Standard Dues for all members with an Enhanced Dues Program (*Giborim* – Heroes) for congregants able to supplement Standard Dues. Standard Dues are \$1,400 for individuals and \$2,175 for families.

Dues are for a one-year period, based on the Temple's fiscal year which begins July 1 and ends June 30. Dues may be paid in advance, quarterly, semi-annually, or over 10 months; payment by credit card (VISA, MasterCard, Discover, AMEX) is available.

Anyone unable to meet the standard dues must speak with the Executive Director to request dues relief.

### GIBORIM — HEROES:

Members are asked to contribute the Standard Dues and are encouraged to consider joining our Enhanced Dues/*Giborim* Program. Members of the *Giborim* Program will receive special recognition as well as the gratitude of our entire community. It is in keeping with Jewish tradition that one contributes in accordance with the material blessings she/he has received. This is also our covenant of membership.

It is our greatest hope that all Congregants elect to contribute more than the standard rate. This generosity directly enables individuals and families with more limited resources to remain an integral part of the Kol Ami community and advance our mission as a progressive Reform congregation to pursue social justice, support Israel and provide a diverse Jewish spiritual home.

## LEGACY CIRCLE

### AN INVITATION FROM KOL AMI'S LEADERSHIP:

We've established the Legacy Circle to honor and recognize members and friends who have remembered Kol Ami through their wills and trusts. We invite you to become a member of the Legacy Circle, helping to ensure the future of Congregation Kol Ami for generations to come. Help to secure the continued availability of our warm and nurturing sanctuary of acceptance and our commitments to Israel and the principals of social justice and diverse. The Legacy Circle will ensure that Kol Ami can generate enough income to maintain the synagogue for years to come. It will be one of your finest legacies.

### MEMBERS WILL BE RECOGNIZED IN A VARIETY OF WAYS:

- Invitations to special gatherings including dinner with clergy
- Acknowledgement on the Legacy Circle plaque placed in the temple
- Invitations to estate planning seminars

### TYPES OF BEQUESTS INCLUDE:

- Designating Kol Ami in your will or trust
- Creating a charitable gift annuity
- Donating your house or other property, continuing to live there, and receiving an immediate tax deduction

***"Great is the privilege of the philanthropist, for he or she awakens the good in the Jewish community. In as much as tzedakah is the tree of life, it saves from death"*** - Zohar iii, 111a



MEMBERSHIP & SUPPLEMENTAL CONTRIBUTIONS

STANDARD MEMBERSHIP DUES: [ ] \$1,400 Individual or [ ] \$2,175 Families \$
UNDER 35 MEMBERSHIP DUES (first year only): [ ] \$180 Individual or [ ] \$360 Families \$
Plus mandatory \$150 Building Maintenance fee \$ 150

GIBORIM - HEROES Please indicate your additional contribution level:
Chesed ("Kindness & Goodness"), \$500 to \$1,799 (in addition to Standard Membership Dues)
Chai ("Life"), \$1,800 to \$3,599 (in addition to Standard Membership Dues)
Major Doner, \$5,000 to \$10,000 (includes Standard Membership Dues)
Patron, \$36,000 (includes Standard Membership Dues)

ADDITIONAL GIBORIM CONTRIBUTION: \$
TOTAL MEMBERSHIP AND GIBORIM CONTRIBUTIONS: \$

SPONSORSHIP OPPORTUNITIES:

ONEG [ ] I/we would like to be an Annual Oneg Sponsor (\$450) \$
[ ] I/we would like to sponsor \_\_\_ Oneg Shabbat(s) this year (\$100 each) \$

On the following dates:
In honor/memory of:

FLOWERS [ ] I/we would like to sponsor \_\_\_ Shabbat flower displays (\$180 each) \$

On these dates:
In honor/memory of:

BUILDING FUND [ ] I/we would like to make a pledge to the Building Fund \$

In honor/memory of:

MEMORIAL PLAQUE [ ] I/we would like to memorialize my/our deceased loved one(s) (\$650 each) \$

Name of Deceased
English date of death After Sundown: Y / N

MEN OF KOL AMI [ ] I/we would like to join Men of Kol Ami (\$35 per person, annually) \$

WOMEN OF KOL AMI [ ] I/we would like to join Women of Kol Ami (\$35 per person annually) \$

ARZA [ ] I/we want to support ARZA (\$50 per household, annually) \$

ARZA is the Zionist arm of the Reform Movement & affiliate of the URJ, serving 1.5 million Reform/Progressive Jews. By donating, you can support ARZA & a progressive & inclusive vision of Judaism & Zionism here & in Israel.

TOTAL SPONSORSHIP OPPORTUNITIES CONTRIBUTIONS: \$

GRAND TOTAL: \$

METHOD OF PAYMENT (NOTE: Dues may be paid over a 10 month period)

Congregation Kol Ami greatly appreciates automatic payments.

Please charge my credit card: [ ] Annually [ ] Semi-annually [ ] Quarterly [ ] Ten month payment

Credit Card # Exp. date

Billing Street # & zipcode 3 or 4 digit CVV #-back of card for visa, m/c, discover; front of card for amex

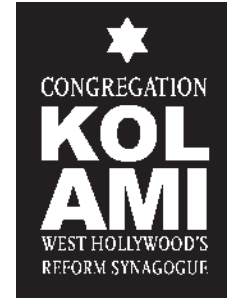
I/We prefer to pay by check (enclosed) in the amount of \$ to be applied toward: [ ] Annual [ ] Semi-annual [ ] Quarterly Dues

Member A Signature

Member B Signature

Date

CONGREGATON KOL AMI MEMBERSHIP APPLICATION



We are delighted you have decided to join our family. We are a progressive Reform Jewish congregation founded in 1992, respected for our commitment to social justice, while warmly embracing and nurturing the spiritual, educational, and familial needs of our diverse community. We welcome gay, lesbian, bisexual, and straight people, their loved ones, families, and friends.

To further your full involvement in the life of the congregation, we ask you to complete this application form. The data you share remains completely confidential. This information helps us gather an accurate profile of our membership and thus enables us to more efficiently plan for our present and future programs.

Thank you. We look forward to welcoming you as a member of Congregation Kol Ami.

Please Type or Print Legibly

Date

PERSONAL INFORMATION

MEMBER A

MEMBER B

Last Name

Last Name

First MI

First MI

Home address

Home address

City State Zip

City State Zip

Phone (H) (C)

Phone (H) (C)

Phone (work)

Phone (work)

Email address

Email

DOB:

Please add me to the Kol Ami email list: [ ]

Please add me to the Kol Ami email list: [ ]

DOB: Anniversary:

Occupation

Occupation

Name of company

Name of company

Bus. address

Bus. address

City State Zip

City State Zip

[ ] Student [ ] Retired

[ ] Student [ ] Retired

Last school attended Date

Last school attended Date

Degree

Degree

JEWISH/HEBREW BACKGROUND

Prev. Synagogue Affiliation

Prev. Synagogue Affiliation

[ ] Board member [ ] Committee member

[ ] Board member [ ] Committee member

Bar/Bat Mitzvah Where/Date

Bar/Bat Mitzvah Where/Date

Confirmed [ ] yes [ ] no

Confirmed [ ] yes [ ] no

Jewish Organizational Involvement

Jewish Organizational Involvement

[ ] Read Hebrew [ ] Speak Hebrew [ ] Chant Hebrew

[ ] Read Hebrew [ ] Speak Hebrew [ ] Chant Hebrew

Hebrew Name

Hebrew Name