

2011-2012 Membership Renewal Contribution

Name(s):

Your 2010-2011 Contribution was:

Please select from the following dues categories according to your ability to pay. We appreciate you giving as much as you can and pledging over and above last year's contribution if you have the means.

Please indicate the amount:

✧ Pillar (\$10,000 and above) \$ _____

✧ Benefactor (\$6,000 and above) \$ _____

✧ **Sustaining (\$2,500 and above)** \$ _____

✧ Above Minimum (Above \$1,800) \$ _____

✧ Minimum (\$1,800.00) \$ _____

✧ Basic (\$36.00 and above) \$ _____

In addition to: My / Our Membership Commitment above, I /We would like to make an additional donation(s) this year of:

To: \$ _____ Temple Beth El Building Fund (see next page)

To: \$ _____ Temple School Scholarship Fund (Check Enclosed)

Check here if you would like your contribution to be **anonymous**

My/our Commitment for 2011-2012 is: \$ _____

**Thank you for supporting your Temple community.
Please complete and return the attached membership forms by July 1 2011.**

2011-2012 Membership Renewal Method of Payment

Please consider that it costs \$2500 per household to sustain a fully functioning Temple.

METHOD OF PAYMENT (Please choose one of these payment options. No others will be accepted.)

NOTE: To contain costs, we request that you **strongly consider paying by cash or check**. Other forms of payment have associated costs, and in fairness to all, we have added a suggested donation to cover what we lose to the credit card companies when you choose that option.

Name: _____

- One payment by Cash (Due prior to High Holiday tickets issued / September 2 2011)
- One payment by Check (Due prior to High Holiday tickets issued / September 2 2011)
- One payment by appreciated stock: Please call the Temple office before you initiate a sale, if you would like to pay by stock.

Stock Name _____ # of Shares _____

- Monthly ACH payments: **1st payment now** and the remaining payments taken on the 20th of each month with the last payment to be taken on June 20, 2012. **The attached ACH form must be completed each year for this payment plan and must be turned in with the Membership Form.** There is no charge for this service
- Payment by Credit Card (Please complete the section below)
 - I agree to an additional donation of \$ _____ (3% of contribution if possible, any amount helps)
- One Credit Card Payment to be taken now.
- Two Credit Card Payments: **1st payment now** and 2nd payment automatically taken on December 15.
 - Visa MasterCard Discover **(We Only Accept These Credit Cards)**

I authorize Temple Beth El to charge my credit card for one/two payments equal to the full amount of my commitment.

Name As It Appears On Credit Card: _____

Credit Card Number: _____ Expiration Date: _____

Security Code on the Back of the Card: _____

Billing Address of Card Holder: _____

Signature: _____ Date: _____

ACH Form Authorization for Automatic Bank Deductions

ORIGINATOR: Temple Beth El Jewish Community Center

ORIGINATOR ID: 94-6139655

You may elect to pay your fees and/or Temple School tuition by having payments automatically deducted from your bank account each month by completing this authorization agreement. These monthly payments will appear on your financial statements with the month and description "ACH" (Automatic Clearing House).

I / We authorize Temple Beth El Jewish Community Center to initiate debit entries to my/our checking account indicated below, and for the bank or credit union named below to debit the same account as specified.

This authorization is to remain in full effect until Temple Beth El has received my full 2011-2012 pledge amount and/or Temple School tuition.

Name _____ Social Security # _____
As listed on Membership form

Name _____ Bank/Credit Union: _____
As listed on Bank Account

Branch _____

Transit/ABA # _____ Individual Account # _____
First 9 digits from lower left of your check

Please select payment option: (Please do not include the additional donation amounts.)

*You must attach a voided check for your paperwork to be processed.
This is a bank requirement. Forms without a check will be returned.*

\$ _____ 2011-2012 Membership Pledge	\$ _____ 2011-2012 Temple School Tuition
Please divide your pledge by the number of months from this month through June to calculate the monthly amount that will be deducted from your bank account. Monthly payments of \$ _____, the first now and then on the 20 th of each month through June 20, 2012.	Please divide your tuition by the number of months from this month through June to calculate the monthly amount that will be deducted from your bank account. Monthly payments of \$ _____, the first now and then on the 20 th of each month through June 20, 2012.

Signature _____

Date _____

Changes to Personal Information and New Yahrzeits

1. Please provide: **Wedding / Commitment Anniversary Date:** _____
2. Please provide **Birthday Information:** Member: _____ Spouse/Partner: _____
3. Please let us know of any changes to your personal information, i.e., new address, phone number, e-mail, occupation, additions to the family or change in relationship status.

New Address: _____

New Phone Number(s) Home and/or Cell:

Member: _____ **Spouse/Partner:** _____

New Email Address(es):

Member: _____ **Spouse/Partner:** _____

Addition to the Family: _____

If Elderly Parent, please indicate relationship: member or spouse/partner

New Occupation: Member: **Business Name:** _____

Phone: _____

Spouse/Partner: **Business Name:** _____

Phone: _____

Change in Relationship Status: Divorced Separated Widowed

Please provide information on Temple School Form if parent is not a Temple member or resides in a different household

Please list any **NEW Yahrzeits**. Those previously provided will continue to be recognized.

Please be sure to include the following information for new Yahrzeits: relationship to either member or spouse and observance for secular or Hebrew date.

Connecting with Temple Life

Adult 1: _____
 First/Last name Best day/time to reach Best phone # to call

Email Address: _____

Adult 2: _____
 First/Last name Best day/time to reach Best phone # to call

Email Address: _____

Do you belong to a *Chavurah*? Yes No **Indicate Name:** _____

Is your *Chavurah* accepting new members? Yes No

Would you like to join a *Chavurah*? Yes No

Would you be willing to help welcome new Temple members as part of our *Gesher v'Kesher* Program? Yes No

Would you be willing to host a neighborhood gathering? Yes No

Thank you for indicating your interests below (Column 1 for Adult 1 and Column 2 for Adult 2).
 Questions? Please contact Richie Solomon at 336-1642 or e-mail: solomonzoo@sbcglobal.net.

- | 1 | 2 | 1 | 2 |
|--------------------------|------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> Adult Education | <input type="checkbox"/> | <input type="checkbox"/> Interfaith Families |
| <input type="checkbox"/> | <input type="checkbox"/> <i>Bikur Cholim</i> (Visiting the Sick) | <input type="checkbox"/> | <input type="checkbox"/> Israel Support Committee |
| <input type="checkbox"/> | <input type="checkbox"/> Brotherhood | <input type="checkbox"/> | <input type="checkbox"/> Jewish A Lot for Parents & Tots |
| <input type="checkbox"/> | <input type="checkbox"/> Building & Grounds | <input type="checkbox"/> | <input type="checkbox"/> Library |
| <input type="checkbox"/> | <input type="checkbox"/> Caring Committee | <input type="checkbox"/> | <input type="checkbox"/> Membership Committee |
| <input type="checkbox"/> | <input type="checkbox"/> Cemetery | <input type="checkbox"/> | <input type="checkbox"/> Office Volunteer |
| <input type="checkbox"/> | <input type="checkbox"/> Carpenter | <input type="checkbox"/> | <input type="checkbox"/> Ritual Practice/Worship |
| <input type="checkbox"/> | <input type="checkbox"/> <i>Chevra Kadisha</i> (Burial Society) | <input type="checkbox"/> | <input type="checkbox"/> <i>Rosh Chodesh</i> (Women's Celebration) |
| <input type="checkbox"/> | <input type="checkbox"/> Choir | <input type="checkbox"/> | <input type="checkbox"/> Senior Connections |
| <input type="checkbox"/> | <input type="checkbox"/> Community Relations | <input type="checkbox"/> | <input type="checkbox"/> Simcha Preschool |
| <input type="checkbox"/> | <input type="checkbox"/> Computer Skills | <input type="checkbox"/> | <input type="checkbox"/> Sisterhood |
| <input type="checkbox"/> | <input type="checkbox"/> Cook for the Mazon Project | <input type="checkbox"/> | <input type="checkbox"/> Social Action |
| <input type="checkbox"/> | <input type="checkbox"/> COPA (Interfaith Community Organizing) | <input type="checkbox"/> | <input type="checkbox"/> Teaching |
| <input type="checkbox"/> | <input type="checkbox"/> Education Committee | <input type="checkbox"/> | <input type="checkbox"/> Temple School PTA |
| <input type="checkbox"/> | <input type="checkbox"/> Finance | <input type="checkbox"/> | <input type="checkbox"/> Temple School Volunteer |
| <input type="checkbox"/> | <input type="checkbox"/> Flyers/Posters | <input type="checkbox"/> | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> | <input type="checkbox"/> Fundraising | <input type="checkbox"/> | <input type="checkbox"/> Web Site Development |
| <input type="checkbox"/> | <input type="checkbox"/> GLBTQI | <input type="checkbox"/> | <input type="checkbox"/> Writing/Publicity/T.V./Radio Spots |
| <input type="checkbox"/> | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> | <input type="checkbox"/> Youth Committee |
| <input type="checkbox"/> | <input type="checkbox"/> Handyperson | <input type="checkbox"/> | <input type="checkbox"/> Other: _____ |