



OFFICE USE ONLY!
ID# _____

Membership Application

Welcome! We are very pleased that you have chosen to become a member of Temple Rodef Shalom, a *Kehilla Kedosha*, sacred community. Completing this application will help us get to know you and your household.

INDIVIDUAL INFORMATION – ADULT #1

Mr. Mrs. Ms. Dr. Other _____

First Name _____

(Nickname _____)

Last Name _____

Birthdate (mm/dd/yyyy) ____/____/____

Adult #1 Email _____

Adult #1 Cell Phone _____

Jewish Non-Jewish

FAMILY INFORMATION – ADULT # 2

Mr. Mrs. Ms. Dr. Other _____

First Name _____

(Nickname _____)

Last Name _____

Birthdate (mm/dd/yyyy) ____/____/____

Adult # 2 Email _____

Adult # 2 Cell Phone _____

Jewish Non-Jewish

Married – Anniversary Date _____ Divorced Single Widowed

Engaged -- Wedding Date _____ Separated Partnered

HOME INFORMATION

Street Address _____

City _____ State _____ Zip _____

Home Phone _____

SEASONAL ADDRESS INFORMATION (Please send mail to this address (day/month) from ____/____ to ____/____)

Street Address _____ City _____ State _____ Zip _____

BUSINESS INFORMATION — ADULT # 1

Position/Title _____

Employer _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

BUSINESS INFORMATION — ADULT # 2

Position/Title _____

Employer _____

Street Address _____

City _____ State _____ Zip _____

Phone _____



Temple Rodef Shalom

CHILDREN

Name	Birthdate	Gender	Grade	School	Hebrew Name	Email Address
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

RELATIVES (Please list relative or friends who are affiliated with Temple Rodef Shalom)

_____ Name	_____ Relationship	_____ Name	_____ Relationship
_____ Name	_____ Relationship	_____ Name	_____ Relationship

PREVIOUS SYNAGOGUE AFFILIATION

Name of Congregation _____ Date of Membership _____
 Location of Congregation (City, State) _____, _____ Did you resign as a member in good standing? _____

Yahrzeit (for immediate family members: spouses, parents, siblings, and children)

Name	Relationship/Adult # 1 or 2	Date of Death	Please choose a Secular (S) or Jewish (J) Calendar Date
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____
_____	_____	____/____/____	_____

EMERGENCY CONTACT INFORMATION

Name _____ Relationship _____
 Address _____
 Day Phone _____ Eve. Phone _____
 Email address _____



YOUR MEMBERSHIP COMMITMENT

“And everyone who excelled in ability and everyone whose spirit was moved came, bringing...an offering for the work of the Tent of Meeting....” Exodus 35:21

Upon submission of your application for Temple membership, you enter into a covenant with the family of Temple Rodef Shalom. As a Temple member, we hope you will...

- share the responsibility of building a *kehilla kedosha*, a sacred community;
- embrace and uphold the ethics and teachings of progressive Judaism;
- help us renew and rebuild a broken world;
- educate and empower the next generation;
- sustain Temple Rodef Shalom with a financial contribution.

There are so many wonderful things about Temple Rodef Shalom: an amazing team of rabbis and cantors who provide spiritual and pastoral services every single day of the year; a professional staff who produce educational programs and classes for adults and children, social action projects, cultural events, and youth activities and who also manage our large and beautiful facility; highly regarded Nursery and Religious Schools; a Summer Camp full of energy and *ruach*; and a congregation ready to welcome all.

Your Annual Membership Commitment and Facility Maintenance Fund contribution make all of this possible, help secure the future of this thriving and sacred place, and enable Temple Rodef Shalom to keep doing good and important work in the world.

Temple Rodef Shalom does not employ the model of fixed dues for Temple membership. Instead, the Temple’s financial needs are met through annual membership donations based on the idea of “fair share.”

Fair Share: We ask each individual or family to calculate their “fair share” annually according to a percentage (2%) of each household’s gross annual income (from all sources, e.g., wages, dividends, retirement income, etc.). Each household then shoulders their “fair share” of maintaining our community.

Facility Maintenance Fund: The Facility Maintenance Fund for facility upkeep and related contingencies is a 10-year pledge payable at \$500 per year for dual-adult households (for a total of \$5,000) and at \$200 per year for single-adult households (for a total of \$2,000).

This plan works only if we are honest with ourselves and with one another. The Temple does not ask for income tax returns or other forms of income verification. The Temple does ask that you do your best, that you are as generous as possible, and that you keep your commitment, re-evaluating annually as your income changes.

No one is ever excluded from Temple membership due to financial constraints. Yet all are expected to participate in supporting the community. If your income from all sources is below \$50,000 or you are under the age of 30, please contact the Director of Membership Engagement.

Health, Safety, and Security Fee: Approved by the Congregation in June of 2021, this fee will offset increased costs due to our changing security climate and Covid-19. The fee is \$360/year for dual-adult households and \$180/year for single households.

YOUR MEMBERSHIP COMMITMENT continued

I/We hereby apply for membership in the *kehilla kedosha* of Temple Rodef Shalom. I/We agree to abide by its Constitution and By-Laws and such regulations as authorized by the Board of Directors now in effect and those hereafter adopted for the conduct and support of the Congregation.

Membership Commitment Guidelines

Estimated Gross Annual Income (from all sources)	2% of Gross Annual Income
Less than \$50,000 or under age 30	Please contact Director of Membership Engagement.
\$50,000 - \$100,000	\$1,000 - \$2,000
\$100,000 - \$150,000	\$2,000 - \$3,000
\$150,000 - \$200,000	\$3,000 - \$4,000
\$200,000 - \$250,000	\$4,000 - \$5,000
\$250,000 - \$300,000	\$5,000 - \$6,000
\$350,000 - \$400,000	\$6,000 - \$8,000
\$400,000 - \$500,000	\$8,000 - \$10,000
\$500,000+	\$10,000+

I/We acknowledge our responsibility for sustaining our *kehilla kedosha* by setting an annual membership commitment of \$_____.

I/We also agree to contribute to the Facility Maintenance Fund (FMF) for facility upkeep (capped at \$5,000) and related contingencies at \$500 per year for a dual-adult households or \$200 per year for single-adult households (capped at \$2,000) for 10 years.

Enclosed with our application is our first quarter's contribution:

\$_____ = ¼ annual membership commitment
 + \$_____ = ¼ annual FMF contribution (\$125 for dual-adult households; \$50 for single adult households)
 + \$_____ = ¼ annual Health, Safety, & Security (\$90 for dual-adult households; \$45 for single adult households) =
 = \$_____ ¼ annual contribution

Please sign below:

Signature

Please print your name.

Date

Signature

Please print your name.

Date

