

Membership Application

Welcome! We are very pleased that you have chosen to become a member of Temple Rodef Shalom, a *Kehilla Kedosha*, a sacred community.

Completing this application will help us get to know you and your household.

INDIVIDUAL INFORMATION - ADULT #1	FAMILY INFORMATION - ADULT # 2					
Mr. Mrs. Ms. Dr. Other	Mr. Mrs. Ms. Dr. Other					
First Name:	First Name:					
Nickname (if applicable):	Nickname (if applicable):Last Name:					
Last Name:						
Birthdate (mm/dd/yyyy): / / /	Birthdate (mm/dd/yyyy): //					
Adult #1 Email:	Adult # 2 Email:					
Adult #1 Cell Phone:	Adult # 2 Cell Phone:					
Jewish Non-Jewish	Jewish Non-Jewish					
Hebrew Name (if applicable):	Hebrew Name (if applicable):					
RELATIONSHIPS Married – Anniversary Date / / Engaged Wedding Date / /	Divorced Single Widowed Separated Partnered					
HOME INFORMATION						
Street Address						
	Zip					
Home Phone						
	d mail to this address (day/month) fromto)					
Street Address						
City State	Zip					
Home Phone						
BUSINESS INFORMATION — ADULT # 1	BUSINESS INFORMATION — ADULT # 2					
Position/Title	Position/Title					
Employer	Employer					
Street Address	Street Address					
CityZip	City StateZip					
Phone	Phone					

CHILDREN aged 25 and	l under (includ	led in all mer	mber benefits)		
Name	Birthdate Ge			Hebrew Name	Email Address
CHILDREN aged 26 and	l older				
Name	Birthdate	e Gende	er Hebrew Nar	me Email Add	ress
RELATIVES (Please list	relatives or fr	iends who aı	e affiliated with	Temple Rodef Sha	alom)
Name	Relations	ship	Name		Relationship
Name	Relations	ship	Name		 Relationship
PREVIOUS SYNAGOGU	JE AFFILIATI	ON			
Name of Congregation _			Date of M	lembership	111
Location of Congregation	n (City, State)		Did you re	esign as a member	in good standing?
Your reason for joining T	RS at this tim	e:	Early Childhoo	od Center	Religious School
Seeking Jewish (Community/Sc	ocial	Spiritual Conn	ections/Clergy	
Lifecycle Event (Specify:) Oth	er:	
YAHRZEITS (for immedi	iate family me	mhers: snou	ses narents si	ihlings and childre	n)
TATITUE (TOT ITTITITION	ato farmiy mo	твого. ороц	ooo, parorito, oi	iomigo, and ormaro	Type if Secular (S) or
Name				Date of Death	Jewish (J) Calendar Date
		-			
EMERGENCY CONTAC	T INFORMAT	ION .			
			Relationsh	nin	
Email address					

As a member, you will share in building our sacred community with access to all the wonderful things that make Temple Rodef Shalom special including:

- an amazing clergy team who provide spiritual and pastoral services every day of the year;
- robust educational programs and classes for adults and children;
- a highly regarded Early Childhood Center, Religious School and Camp Rodef Shalom;
- meaningful social action projects, lively cultural events and youth activities;
- a caring community and a beautiful facility, ready to welcome all!

Temple Rodef Shalom does not have fixed dues; Members give their *fair share* to support the community

Your annual financial contribution to TRS is comprised of:

- A "Fair Share" Membership Contribution (2% of gross annual income from all sources);
- **A Facility Maintenance Fund Contribution** (funds for facility upkeep; \$500/year for multi-person households and \$200/year for a single person, for the first 10 years of membership);
- A Security Fee (this fee offsets increased security costs due to our changing security climate; \$360/year for multi-person households and \$180/year for a single person).

For example, a multi-person household with an annual gross income of \$180,000 would give:

<u>\$3,600</u>	+	\$500	+	\$360	_ =	\$4,460
Annual Membership	-	Annual Facility	- "	Annual Security		Total Annual
Contribution		Maintenance Fund		Fee		Contribution
(Sustaining amount)		Contribution				

No one is ever excluded from Temple membership for financial reasons, nor do we ask for any form of income verification; we do ask that everyone contributes what they are able to. If your planned membership contribution is less than \$1800 per year, please reach out to Melissa Weinstock, our membership manager. Please reach out about special rates for members under 30. While we bill quarterly, members can pay their annual contributions annually, quarterly or monthly.

Please IIIIoul life works	neet below.		
\$	+\$	+ \$	= \$
Annual Membership Contribution	Annual Facility Maintenance Fund Contribution	Annual Security F	ee Total Annual Contribution
	\$500 for multi-person households \$200 for a single person	\$360 for multi-person hou \$180 for a single pers	
Purposes of the Cong	membership in the kehilla kedo regation as outlined in the TRS eafter adopted, for the conduct	By-Laws and agree to	abide by the Code of Ethics now
Signature	Please p	rint your name	Date
Signature	Please p	rint your name	 Date

