



Welcome to
West End Synagogue
Membership Application

West End Synagogue
A Reconstructionist Congregation
190 Amsterdam Ave., New York, NY 10023
TEL. (212) 579-0777 FAX (212) 579-2669

www.westendsynagogue.org

West End Synagogue 2009 Membership Application

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Date _____

Name(s) to use on mailing labels _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Home Fax _____

How did you hear about West End Synagogue? _____

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Adult 1: Name _____

Birth Date _____ Marital Status (optional) _____ Anniversary (if applicable) _____

Jewish: Yes/ No (see below) Hebrew Name _____

Cell Phone # _____ Email _____

Occupation _____ Business Name _____

Work Phone _____ Work Fax _____

Read/ Write Hebrew: Yes/ No Read Torah/ Haftarah: Yes/ No

Adult 2: Name _____

Birth Date _____ Marital Status (optional) _____ Anniversary (if applicable) _____

Jewish: Yes/ No (see below) Hebrew Name _____

Cell Phone # _____ Email _____

Occupation _____ Business Name _____

Work Phone _____ Work Fax _____

Read/ Write Hebrew: Yes/ No Read Torah/ Haftarah: Yes/ No

Notes:

- We welcome non-Jewish partners and encourage them to participate in the life of our community. If you have questions or concerns in this area, feel free to contact the Rabbi at extension 226.
- Names, addresses, phone numbers, and children's names will be included on our community list. If you do not want any of these items to be listed, please let us know.

West End Synagogue 2009 Membership Application

Children:

<u>Name</u>	<u>Grade</u>	<u>Gender</u>	<u>Date of Birth</u>	<u>B/ Mitzvah Date</u>	<u>School</u>
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Yahrzeit Information *(if you would like to be reminded of the anniversary of the death of a loved one)*

<u>Name</u>	<u>Related to?</u>	<u>Relationship</u>	<u>Date of Death</u>	<u>Died before sundown?*</u>
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-----	-----	-----	-----	-----
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* **Note:** The time of death (before or after sundown) is needed to determine the date of death on the Jewish calendar.



Interests: (Please indicate which person is interested in each selection)

___ Adult Education	___ Hebrew School	___ Ritual
___ Bible, Text Study	___ Learner's Service	___ Social Action
___ Bikkur Cholim (visiting the sick)	___ Publicity	___ Ushering
___ Family Programming	___ Israel Programming	___ Website
___ Fundraising	___ Membership	___ Women's Study Group
___ Garden	___ Publicity	___ Volunteer in the office

Other _____

West End Synagogue 2009 Membership Application

Financial Obligations of Members

The synagogue's fiscal year is 1/1 – 12/31

Fair Share Dues

Fair Share affirms our community's values of accessibility to WES membership, social justice and individual responsibility to the community. On the following page you will find a 'Fair Share Pledge Form' for your membership dues. All members are asked to pledge their dues by January of each year based on the attached dues schedule. All financial obligations to the synagogue must be paid in full before High Holy Day tickets are mailed.

Building Fund

New members are expected to contribute at least \$200 per year until a total of \$1,000 has been paid to the building fund.

Additional High Holy Day Tickets (2008 Rates)

Additional High Holy Day Tickets: Adult (22 years of age & older), \$275 (non-members \$375); Young Adult (13–21) \$75 each; Child (2–12) \$36 each.

Religious School Tuition & Fees (2008–09)

	Members	NonMembers (<i>1st year only</i>)
1 day per week (PreK–2 nd grade)	\$800	\$1,000
2 days per week (3 rd – 7 th grades)	\$1200	N/A

Feel free to contact our Treasurer through our Executive Director's office at 212-579-0777, ext. 220, to discuss any special financial arrangements.

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Did you know that membership dues cover less than 40% of our operating budget? Every year we must continue to meet the challenge of funding the many programs that define our synagogue, including educational offerings for all ages, services that are spiritually relevant, social action opportunities that are effective and meeting the pastoral needs of our nearly 300 families.

The following are a few of the various giving opportunities that you might want to consider during the year. They each can be a wonderful way to commemorate an important date or honor a loved one.

Kol Nidre Partnership Appeal

During the High Holy Days, we ask all of our members to join together in partnership to support our most important fundraiser of the year. This appeal provides many of the funds that we need to continue the high level of programming that we offer throughout the year.

Kiddush Sponsorship

This is a very meaningful way to celebrate a simcha, honor a loved one or mark a *yahrzeit*. By sponsoring a *kiddush*, you have the opportunity to share your special day with the entire community. A Friday night *oneg* can be sponsored for \$200 or more. Sponsor a Saturday *kiddush* for \$500 or make a contribution toward *kiddush*. Please contact our Executive Director, Lila Pahl, if you are interested.

West End Synagogue 2009 Membership Application

Rabbi or Cantor Discretionary Fund

These gifts are made directly to the Rabbi or Cantor and are used for various projects at their discretion.

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West End Synagogue is a mutually supportive synagogue community. Our dues structure is based on a sliding scale of gross household income*, and promotes a diverse membership. We therefore rely on each member to support the work of our community to the fullest extent.

In acceptance of that responsibility, I/we hereby pledge my/our "Fair Share Dues" (based on the attached schedule), which I/we have fully assessed in the amount of: _____.

Signature of Member _____

Name/Names _____

Address _____

City _____ State _____ Zip _____

Phone (Home) _____ (Work) _____

Email Address _____

Membership Type:

Family _____ Individual _____ Student _____ Out of town _____

Definition of Memberships:

Individual/ Single Parent Membership: One adult/One adult with children under the age of 22. This membership includes one adult seat for the High Holy Days as well as a seat for each child under the age of 22.

Family Membership: Two adults married or living in a partnered relationship with or without children. This membership includes two tickets for the High Holy Days and tickets for all children under the age of 22.

Out-Of-Town Memberships An individual or family maintaining its/their primary residence outside the NY metropolitan area. This membership does not include any seats for the High Holy Days.

Student Membership Fulltime student with ID enrolled in a degree granting program.

Members who are in their first five years of membership will continue to be obligated to pay \$200 per year to the building fund.

*** Income includes all sources whether taxable or not.**

West End Synagogue 2009 Membership Application

Payment Options

WES would prefer payment by check in order to avoid credit card company charges.

Payment Schedules

(Choose one)

- I am enclosing the total amount of my dues.
- I will pay 1/2 of my dues now and the balance by July 15th.
- I would like to pay by equal monthly payments using a credit card. (WES will divide the amount owing among the months from now until August.)

Forms of Payment

(Choose one)

- I will be paying by check
- Please use the following credit card for membership payments as chosen above.

Name _____ (as it appears on the card)

Visa _____ Mastercard _____ Amex _____

Credit Card Number _____

Expiration Date _____

I hereby authorize you to charge my credit card as set forth above.

Signature _____