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Founding Spiritual Leader

Dear Friends,

What draws each of us into a community?

I believe that a desire to connect plays a large role in what brings us into a community. Each one of us deserves to feel a connection to those around us, to feel a sense of belonging. Each one of us deserves to feel a connection to God and to the teachings of our Tradition.

It is with this in mind that I am delighted that you are interested in Congregation Mekor Shalom. Mekor Shalom means Source of Peace. Mekor Shalom is a community where each person matters — your presence, your feelings, and your neshama (your soul). At Mekor Shalom, each of us is welcomed and celebrated for who we are.

Because valuing each person is a core belief, Congregation Mekor Shalom is proud to be the first congregation in Tampa to implement a Self-Selected Annual Financial Commitment in lieu of other more commonly used dues structures. At Mekor Shalom, you make a personal decision as to how much you are able to invest in your synagogue. For a fuller description, please see the enclosed explanation.


Imagine a synagogue where people introduce themselves and get to know one another. Relationships grow and develop. Because every person matters, there is always room for more people. With each new person there are new connections that form. There are no closed circles, only open arms. It is a sacred community. It is a sacred community of sacred relationships. Mekor Shalom is a community in which **to be connected, be accepted, and be inspired.**

I want to invite you to become a part of this sacred community. The weaving of the presence of each person into the communal tapestry is a blessing. Having your uniquely beautiful colors as a part of the tapestry will enrich and enhance Mekor Shalom infinitely. Each one of us has the unlimited potential to be a source of peace for ourselves and for the entire community.

Please feel free to contact me with any questions, comments, concerns, or ideas.

May God, the Source of Peace and Source of all Creation, guide us on this spiritual journey of connection.

B'shalom,


Hazzan Jodi M. Sered-Lever,
Founding Spiritual Leader

Congregation Mekor Shalom

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Congregation Mekor Shalom, Inc is a 501(c)(3) nonprofit organization.

Congregation Mekor Shalom

Connections Form

Connecting with You



Adult #1

Title: Mr./Ms./Mrs./Rabbi/Hazzan/Dr./Col./The Hon./Other: _____

Last name _____ First name _____ Middle name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email address _____ *Please check here, If you prefer to opt out of a listing in the member directory.*

Date of Birth _____

_____ Male _____ Female _____ Transgender _____ Other

My Hebrew Name _____

Father's Hebrew Name _____ Mother's Hebrew Name _____

_____ I am a Kohen _____ I am a Levi _____ I am a Yisrael _____ I don't know

_____ Jewish by Birth _____ Jewish by Choice _____ Supportive Partner

If Jewish by Choice, please share who oversaw your conversion:

Relationship Status

___ Single ___ Married ___ Partnered ___ Widowed ___ Divorced ___ Separated

Wedding anniversary date (if applicable) _____

Occupation(s) or retired (*If retired, please feel free to share your professional field, e.g. retired accountant or retired physicist*):

Business or company name, if applicable: _____

If need be may Mekor Shalom contact you at work? _____

If yes, phone number: _____

Congregation Mekor Shalom Connections Form

Connecting with Your Interests



Adult #1

Last name _____

First name _____

Please check the areas with which you would like to become involved:

_____ **Adult Lifelong Learning Team** Involvement with aspects of the adult education program

Teaching about _____

Learning about _____

_____ **Community Involvement Team** Organizes social action programs and projects

_____ **Financial Stewardship/Endowment Team**

_____ **Fundraising Team** Organizes congregational fundraising activities

_____ **Kiddush Team** Organizes weekly Shabbat morning fellowship refreshments

_____ **Look Who's Coming to Shabbat Team** Organizes monthly, congregational Shabbat meals

_____ **Mekor Tikvah (Source of Hope) Team** Supporting Mekor Shalom friends during times of need

_____ **Membership Team**

Would you like to help out with any of these areas of the Membership Team:

_____ Outreach to new members _____ Welcoming new members _____ Membership retention

_____ **Oneg Team** Organizes weekly Friday night fellowship refreshments

_____ **Staying Connected Team** Organizes congregational social programs

_____ **Youth Activities Team** Helps facilitate the Mekor Shalom Youth Program

Your ideas and suggestions:

Ritual Life

I would like to:

_____ Read Torah _____ Read Haftarah _____ Lead a service

I would like to learn to:

_____ Read Torah _____ Read Haftarah _____ Lead a service

Your ideas and suggestions:

Congregation Mekor Shalom

Connections Form

Connecting with You



Adult #2

Title: Mr./Ms./Mrs./Rabbi/Hazzan/Dr./Col./The Hon./Other: _____

Last name _____ First name _____ Middle name _____

Address (if different from Adult #1) _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email address _____
_____ Please check here if you prefer to opt out of a listing in the member directory.

Date of Birth _____

_____ Male _____ Female _____ Transgender _____ Other

My Hebrew Name _____

Father's Hebrew Name _____ Mother's Hebrew Name _____

_____ I am a Kohen _____ I am a Levi _____ I am a Yisrael _____ I don't know

_____ Jewish by Birth _____ Jewish by Choice _____ Supportive Partner

If Jewish by Choice, please share who oversaw your conversion:

Relationship Status

___ Single ___ Married ___ Partnered ___ Widowed ___ Divorced ___ Separated

Wedding anniversary date (if applicable) _____

Occupation(s) or retired (If retired, please feel free to share your professional field, e.g. retired accountant or retired physicist):

Business or company name, if applicable: _____

If need be may Mekor Shalom contact you at work? _____,

If yes, phone number: _____

Congregation Mekor Shalom Connections Form

Connecting with Your Interests



Adult #2

Last name _____

First name _____

Please check the areas with which you would like to become involved:

_____ **Adult Lifelong Learning Team** Involvement with aspects of the adult education program

Teaching about _____

Learning about _____

_____ **Community Involvement Team** Organizes social action programs and projects

_____ **Financial Stewardship/Endowment Team**

_____ **Fundraising Team** Organizes congregational fundraising activities

_____ **Kiddush Team** Organizes weekly Shabbat morning fellowship refreshments

_____ **Look Who's Coming to Shabbat Team** Organizes monthly congregational Shabbat meals

_____ **Mekor Tikvah (Source of Hope) Team** Supporting Mekor Shalom friends during times of need

_____ **Membership Team**

Would you like to help out with any of these areas of the Membership Team:

_____ *Outreach to new members* _____ *Welcoming new members* _____ *Membership retention*

_____ **Oneg Team** Organizes weekly Friday night fellowship refreshments

_____ **Staying Connected Team** Organizes congregational social programs

_____ **Youth Activities Team** Helps facilitate the Mekor Shalom Youth Program

Your ideas and suggestions:

Ritual Life

I would like to:

_____ Read Torah _____ Read Haftarah _____ Lead a service

I would like learn to:

_____ Read Torah _____ Read Haftarah _____ Lead a service

Your ideas and suggestions:

Congregation Mekor Shalom Connections Form

Connecting with Your Loved Ones



Dependent Children & Dependent Adult Children

Child #1

Last name _____ First name _____ Middle name _____

_____ Male _____ Female _____ Transgender _____ Other

Date of Birth _____ Hebrew Name _____

Email address (if applicable) _____ Cell Phone (if applicable) _____

Religious Education Plan (*for school age children*):

_____ Mekor Shalom Religious School _____ Hillel Academy _____ Alternative

Areas of Interest:

_____ Read Torah _____ Lead Services _____ Youth Group _____ Teen Classes _____ College Student Care Packages

Child #2

Last name _____ First name _____ Middle name _____

_____ Male _____ Female _____ Transgender _____ Other

Date of Birth _____ Hebrew Name _____

Email address (if applicable) _____ Cell Phone (if applicable) _____

Religious Education Plan (*for school age children*):

_____ Mekor Shalom Religious School _____ Hillel Academy _____ Alternative

Areas of Interest:

_____ Read Torah _____ Lead Services _____ Youth Group _____ Teen Classes _____ College Student Care Packages

Child #3

Last name _____ First name _____ Middle name _____

_____ Male _____ Female _____ Transgender _____ Other

Date of Birth _____ Hebrew Name _____

Email address (if applicable) _____ Cell Phone (if applicable) _____

Religious Education Plan (*for school age children*):

_____ Mekor Shalom Religious School _____ Hillel Academy _____ Alternative

Areas of Interest:

_____ Read Torah _____ Lead Services _____ Youth Group _____ Teen Classes _____ College Student Care Packages

Child #4

Last name _____ First name _____ Middle name _____

_____ Male _____ Female _____ Transgender _____ Other

Date of Birth _____ Hebrew Name _____

Email address (if applicable) _____ Cell Phone (if applicable) _____

Religious Education Plan (*for school age children*):

_____ Mekor Shalom Religious School _____ Hillel Academy _____ Alternative

Areas of Interest:

_____ Read Torah _____ Lead Services _____ Youth Group _____ Teen Classes _____ College Student Care Packages

Congregation Mekor Shalom Connections Form

Connecting with Your Loved Ones



Adult Children

Name _____ Spouse (if applicable) _____ Phone _____

Name _____ Spouse (if applicable) _____ Phone _____

Name _____ Spouse (if applicable) _____ Phone _____

Emergency Contacts (e.g. out of town relatives)

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Name _____ Relationship _____ Phone _____

Remembering Loved Ones Who Have Died: Yahrzeit Information

Name _____ Relationship to (e.g. mother of) _____

English Date of Death (MM/DD/YY) _____ | Death Occurred: _____ Before sundown _____ After sundown

Hebrew Date of Death (if known) _____

Name _____ Relationship to (e.g. mother of) _____

English Date of Death (MM/DD/YY) _____ | Death Occurred: _____ Before sundown _____ After sundown

Hebrew Date of Death (if known) _____

Name _____ Relationship to (e.g. mother of) _____

English Date of Death (MM/DD/YY) _____ | Death Occurred: _____ Before sundown _____ After sundown

Hebrew Date of Death (if known) _____

Name _____ Relationship to (e.g. mother of) _____

English Date of Death (MM/DD/YY) _____ | Death Occurred: _____ Before sundown _____ After sundown

Hebrew Date of Death (if known) _____

Membership Covenant: I/We hereby commit to cultivating and becoming a part of the fabric of a sacred community where people care about people. We will strive to nurture our neshamot, our souls, as part of our spiritual journey, to grow and evolve Jewishly, and to support the sacred work of Congregation Mekor Shalom.

Signature(s) _____

Date _____

The Mitzvah of Tzedakah: Making a Self-Selected Annual Financial Commitment

One who gives freely ends with more (Proverbs 11:24).

What is the Self-Selected Annual Financial Commitment?

Congregation Mekor Shalom requires each household to pledge a meaningful monetary contribution for each year of membership. Each household chooses how much they are able to invest in the synagogue. It's a **Self-Selected Annual Financial Commitment** instead of a set dues structure.

What is included in the membership?

Every Self-Selected Annual Financial Commitment amount provides a full synagogue membership with **all of the services and programs offered at Mekor Shalom including:**

- High Holiday seating for up to two (2) adults, all dependent children, & dependent adults who are a part of the household unit.
- Lifecycle events officiated by Hazzan Sered-Lever, provided at no additional charge, including Bar/Bat/B'nai Mitzvah training.
- The membership provides access to a Religious School education, however, Religious School tuition is a separate charge.

Is there a recommended amount to pledge?

It is an individual decision. Everyone is asked to contribute an amount that reflects their **personal financial capacity**.

- It may be helpful for each household to consider how much they are able to pledge in total and how frequently they will make contributions in order to fulfill the pledge by the end of the fiscal year on June 30.
- One may choose to make a contribution toward the pledge each month, every quarter, twice a year, or annually.

Mekor Shalom still engages in traditional fundraising activities to offset the possibility that Self-Selected Annual Financial Commitments may not cover all of the congregation's operating costs and to begin accumulating capital for the future.

What is the Sustaining Annual Commitment?

If each household were able to make a Sustaining Annual Commitment, Mekor Shalom would be able to meet all of its financial obligations. At this time, if every household were able to contribute \$2400 per year, Mekor Shalom could take care of the rent, professional staff, programming, supplies, etc. For many people, a Sustaining Commitment may be out of reach. For some, it may fit really well.

What is the 10% increase recognition or the Sustaining Annual Commitment recognition?

Households that increase their Annual Commitment by 10% or more from the previous year and/or households that give the Sustaining Annual Commitment or more will receive special recognition by having a leaf placed on the Ark curtain in their honor.

Actual contribution figures are kept in the strictest confidence.

I/we pledge the Self-Selected Annual Financial Commitment indicated above in support of Congregation Mekor Shalom and will fulfill this commitment by the end of the fiscal year on **June 30**:

Contribution Schedule (Please select one.)

- ____ Annual Contribution
- ____ Semi-Annual Contribution
- ____ Quarterly Contribution
- ____ Monthly Contribution

Commitment Total (Please indicate one.) *Special recognition for a 10%+ increase and/or a Sustaining Annual Commitment*

- ____ \$ 2,400.00 **Sustaining Annual Commitment**
- ____ \$ 1,800.00
- ____ \$ 1,200.00 (Would be \$100 monthly)
- ____ \$ 1,000.00
- ____ \$ 600.00 (Would be \$50 monthly)
- ____ \$ _____ Another amount

**Enclosed is: \$ _____
toward this pledge.**

Printed Name(s): _____

Signature(s): _____

Date: _____