



CONGREGATION
Kol Ami

CONFIDENTIAL

2023 – 2024

Dues Adjustment Application Form

Kol Ami does not deny membership to anyone simply based upon their ability to pay. Please fill out this form in its entirety and return it in a sealed envelope to the attention of the Dues Adjustment Committee. Incomplete applications will not be accepted for consideration. Although we are not requesting formal documentation, Congregation Kol Ami reserves the right to request such documentation as it deems appropriate after the review process. All applications and arrangements will be held in the strictest confidence.

Account # _____

Name of Adult 1: _____ Date of Birth _____

Name of Adult 2: _____ Date of Birth _____

List additional dependents:

Contact number: _____ Email Address: _____

May we leave a message from the Dues Adjustment Committee at this number? ___ Yes ___ No

1) Please mark the box of the dues level that, unadjusted, would apply to your household:

MARK X HERE	Age	Household Plurality	Minimum Annual Pledge
	Under 35	Single or multiple	see Dues Chart
	Under 70	Single member	\$1,480
	Under 70	Single w/Dependent	\$1,680
	Under 70	Multiple members	\$1,880
	Youngest member ≥ 70	Single member	\$1,360
	Youngest member ≥ 70	Single w/Dependent	\$1,540
	Youngest member ≥ 70	Multiple members	\$1,720

2) Do you have children enrolled, or to be enrolled in the Kol Yeladim Religious School?
___ Yes ___ No

3) Are you planning a Simcha (Bar or Bat Mitzvah, Wedding, etc.) within the next year?
___ Yes ___ No

4) Into what general range does your adjusted gross annual income fall?

MARK "X" HERE	Adjusted gross annual income
	Less than \$15,000
	\$15,000 – \$25,000
	\$25,001 – \$50,000

	\$50,001 – \$75,000
	\$75,001 – \$100,000

5) What amount would you suggest that you can afford on a monthly basis as total dues, building depreciation and security fees. **Religious school tuition and additional Tzedakah amounts are not to be included.** \$_____

6) What additional information would you like us to consider in evaluating your dues adjustment request?

I/we promise that I am/we are providing a truthful assessment of my/our current financial situation and understand that acceptance of this form does not constitute an agreement in any fashion.

Signed: _____

Date _____

Signed: _____

Date _____

This form will be reviewed confidentially, and you will be contacted via telephone or email for further information or to arrange a personal interview if needed with the Dues Adjustment Committee.