



CONGREGATION OR ATID  
Connecting community with spirituality

10625 Patterson Avenue/Henrico, VA 23238  
804.740.4747/[www.oratid.org](http://www.oratid.org)/[www.facebook.com/OrAtid](https://www.facebook.com/OrAtid)

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## Membership Application Fiscal Year 2020-2021

### MEMBER A:

Name (Last, First, MI): \_\_\_\_\_

Marital Status (check one):  Married  Partnered  Engaged  Single  Widowed  Divorced

Gender \_\_\_\_\_ If married, wedding anniversary date: M/D/Y \_\_\_\_\_

Date of Birth: M/D/Y \_\_\_\_\_ Religion: \_\_\_\_\_

Hebrew Name (if applicable): \_\_\_\_\_ If Jewish, are you (circle one) Kohen Levi Israelite

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Profession: \_\_\_\_\_ Employer: \_\_\_\_\_

Email Address/Website Log In: \_\_\_\_\_

### MEMBER B: (if applicable)

Name (Last, First, MI): \_\_\_\_\_

Marital Status (check one):  Married  Partnered  Engaged  Single  Widowed  Divorced

Gender \_\_\_\_\_ Date of Birth: M/D/Y \_\_\_\_\_ Religion: \_\_\_\_\_

Hebrew Name (if applicable): \_\_\_\_\_ If Jewish, are you (circle one) Kohen Levi Israelite

Check box if home address is same as Member A.

Home Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Profession: \_\_\_\_\_ Employer: \_\_\_\_\_

Email Address/Website Log In: \_\_\_\_\_

New Member  Returning Member

**Children's Information (if applicable) Please use reverse side, if necessary.**

**Child 1:**

Name (Last, First, MI): \_\_\_\_\_ Nickname: \_\_\_\_\_

Child lives with:  Both Parents  One Parent \_\_\_\_\_  Other \_\_\_\_\_

Date of Birth: M/D/Y \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Bar/Bat Mitzvah (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ School Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

**Child 2:**

Name (Last, First, MI): \_\_\_\_\_ Nickname: \_\_\_\_\_

Child lives with:  Both Parents  One Parent \_\_\_\_\_  Other \_\_\_\_\_

Date of Birth: M/D/Y \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Bar/Bat Mitzvah (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ School Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

**Child 3:**

Name (Last, First, MI): \_\_\_\_\_ Nickname: \_\_\_\_\_

Child lives with:  Both Parents  One Parent \_\_\_\_\_  Other \_\_\_\_\_

Date of Birth: M/D/Y \_\_\_\_\_ Gender (M/F): \_\_\_\_\_ Bar/Bat Mitzvah (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ School Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

**PHOTO / MEDIA DENIAL OF PERMISSION (Complete this section ONLY if you OPT OUT)**

Any picture or portrait of a student and/or his/her family or of any part of the student and/or his/her family, and any reproductions thereof, may be used by Congregation Or Atid for such purposes as may be desired in connection with advertising, publication and /or publicity.

**IDO NOT** give permission for my child's and /or family's picture or portrait to be used in any media form.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Name (s)

\_\_\_\_\_  
Grade(s)

It is the custom at COA to read the names of loved ones who are no longer with us on the anniversary of their passing. You will be notified via mail the date your loved one's name will be read and the appropriate date to light a Yahrzeit candle. Please use additional sheets as necessary.

**Member A:**

Name (English)	Name (Hebrew)	Relationship	Secular Date of Death / AM/PM

**Member B:**

Name (English)	Name (Hebrew)	Relationship	Secular Date of Death / AM/PM

### Sustaining Share – Undoing dues!

It is our honor as a congregational community to welcome you to our *mishpachah* – our congregational family! The Sustaining Share pledge framework, which replaced a rigid dues structure with our *give-from-the-heart* model, provides the primary means of financial support for your spiritual home at Congregation Or Atid and is more in line with our tagline of “Connecting Community with Spirituality.”

You might now be asking “*how much should I pledge as my Sustaining Share?*” That is a number that only you can determine based on your ability to pay and your desire to maintain and nurture our synagogue going forward. For the new fiscal year beginning on July 1<sup>st</sup>, the total discretionary revenue portion needed to cover our operating budget is projected to be \$408,000. This number encompasses all sources of voluntary gifts to Congregation Or Atid such as High Holiday pledges, Yahrzeit commemorations, contributions for school security, and Sustaining Share contributions, the latter of which constitutes the largest piece by far. The Sustaining Share decision ultimately rests with you and is our main source of income. Your tax-deductible pledge in support allows us to provide excellent spiritual, educational, and social programs that on average costs \$2,200.00 per year, per family. (However, we do suggest a \$500 minimum level of support in the absence of severe financial hardship.)

If you have any questions about what you should contribute, we can put you in touch with an advisor to help determine your contribution. Only our finance team will know what you decide to give. Please contact us at [office@oratid.org](mailto:office@oratid.org) for these questions.

Sustaining Share reflects our community’s view that our *mishpachah* is open to one and all, regardless of means. We have a wide range of contributions from our congregants, and we ask you to be thoughtful about how you will invest in Or Atid so that our congregational family can continue to grow and prosper as the “Light of the Future.”

\*\*\*\*Please note that families with students in the Helen and Sam Kornblau Religious School will also be charged annual tuition, as well as a B’nai Mitzvah fee, if applicable.

### **Membership Declaration**

I hereby apply for membership in Congregation Or Atid and promise to abide by all the rules and regulations of the Congregation. I agree to pay the first year of my membership and thereafter by participating in the Sustaining Share Commitment.

**Member A**

**Member B**

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Signature

Signature

**For office use only:**

Date of Application: \_\_\_\_\_

Met with Rabbi : \_\_\_\_\_

Referring Member: \_\_\_\_\_

Date of Board Approval: \_\_\_\_\_

Please complete the form and return to Wanda Schweiger via snail mail or scan and email a copy to her at [wschweiger@oratid.org](mailto:wschweiger@oratid.org)

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**2020/2021 Sustaining Share Commitment Begins July 1<sup>st</sup>, 2020 - June 30<sup>th</sup>, 2021**

**Yes!** I/We want to support our Congregational Family! My/Our total Sustaining Share is \$\_\_\_\_\_.

I/We will honor my/our Sustaining Share for the fiscal year 2020/2021 in (please check one)

One Payment                       Quarterly                       Monthly                       Other (please explain)

Mailed Monthly or Quarterly Statements     YES     NO

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My/Our Sustaining Share is (please check one)

Enclosed check                       Please charge my card (Visa or MasterCard only) (details below)

Card No. \_\_\_\_\_ Exp. Date \_\_\_\_\_ Security Code \_\_\_\_\_

Name and

Address \_\_\_\_\_

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Sign here confirming your Sustaining Share for 2020/2021 and, if applicable, authorizing charges to your credit card.

\_\_\_\_\_  
Signature & Date

*Please note that the projected budget amount listed on page 4 will be reviewed and subject to change each fiscal year. Our fiscal year runs from July 1 through June 30. The amount listed is currently in effect as of July 1, 2020. Please advise if you wish to receive a monthly statement, otherwise only a yearend statement will be mailed.*

*Please return your application and sustaining share commitment form to Congregation Or Atid with your payment information or your credit card information.*

*If your child/ren will attend The Helen and Sam Kornblau Religious School, please complete the Religious School application. Your child/ren will attend our religious school as a benefit of your synagogue membership. The only cost associated with religious school attendance is an administrative and tuition fee that is currently \$200.00 per Pre-K students per year, \$250.00 per K-2, \$350.00 per 3<sup>rd</sup> -7<sup>th</sup> grade students per year, \$150.00 per Machon students per year for 8<sup>th</sup>-10<sup>th</sup> grade and (if applicable) a B'nai Mitzvah fee of \$550.00 per student due at registration.*