

Congregation of Reform Judaism

Membership Application

APPLICANT		Title	Nickname	
Street Address		City, State, Zip		
Home Phone	Cell Phone	Email Address		
Work Phone	Birth Date (month/day/yr)	Hebrew Name	Date of Marriage	

Current Marital Status:
 Married Single Divorced Widow Engaged Partner

Jewish Tradition
 Reform Conservative Orthodox Non-Affiliated

If not raised in Jewish tradition, are you: (All single members must be Jewish)
 A Jew by Choice (Convert) _____ Year of Conversion Not Jewish _____ Denomination

CO-APPLICANT		Title	Nickname	
Street Address		City, State, Zip		
Home Phone	Cell Phone	Email Address		
Work Phone	Birth Date (month/day/yr)	Hebrew Name	Date of Marriage	

Current Marital Status
 Married Single Divorced Widow Engaged Partner

Jewish Tradition
 Reform Conservative Orthodox Non-Affiliated

If not raised in Jewish tradition, are you:
 A Jew by Choice (Convert) _____ Year of Conversion Not Jewish _____ Denomination

Children

CHILD'S NAME		<input type="checkbox"/> Male <input type="checkbox"/> Female		Birthday	
Hebrew Name	Email Address		School		Grade
CHILD'S NAME		<input type="checkbox"/> Male <input type="checkbox"/> Female		Birthday	
Hebrew Name	Email Address		School		Grade
CHILD'S NAME		<input type="checkbox"/> Male <input type="checkbox"/> Female		Birthday	
Hebrew Name	Email Address		School		Grade

Occupation	
<u>1st Adult Member Present Occupation</u>	If Retired, Previous Occupation
Business Name	Business Email
Business Address	Business City, State, Zip
<u>2nd Adult Member Present Occupation</u>	If Retired, Previous Occupation
Business Name	Business Email
Business Address	Business City, State, Zip

Yahrzeit Information (The <i>Secular Date</i> will be used rather than Hebrew date unless requested.)			
Name	Relationship	Observed by	Date of Death
Name	Relationship	Observed by	Date of Death
Name	Relationship	Observed by	Date of Death

Activities and Programs (Check if interested)			
Adult Education <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Youth Education <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Pre-School <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Choir/Cultural Arts <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult
Sisterhood (WRJ) <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Brotherhood (MRJ) <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Social Programming <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Social Action <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult
Spiritual Think Tank <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Hospital & CARE Committee <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Fundraising <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Women's Rosh Chodesh <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult
Justice Advocacy Group <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Youth Group <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Buildings/Grounds <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult	Torah Study <input type="checkbox"/> 1 st Adult <input type="checkbox"/> 2 nd Adult

Names of Friends and Relatives who are CRJ Members		

Activity & Photo Release	
<p>I hereby give permission for myself and my family to participate in all activities of the Congregation of Reform Judaism (CRJ). The undersigned, individually and as legal guardian(s), hereby release the Congregation of Reform Judaism, Inc. its agents, representatives and employees for any acts or omissions which cause or result in injury at any events held at CRJ or at any outings, or going to and from outings, irrespective of cause. Furthermore, CRJ is given express authority to seek and obtain at our expense any and all emergency medical treatment for and on behalf of the undersigned and my family members for all injuries sustained.</p> <p>I grant the Congregation of Reform Judaism (CRJ), its representatives and employees the right to take photographs of me (and my family and guests), and authorize CRJ, its assigns and transferees to copyright, use the photographs in its promotional and marketing material and publicity efforts. I hereby hold harmless and release CRJ, its representatives and employees from liability for any violation of any personal or proprietary right it may have in connection with such use. I agree that CRJ may use such photographs of me with or without my name and for any lawful purpose, including print and/or electronic usage.</p>	
1 st Adult Member Signature	2 nd Adult Member Signature
Date	Date



Congregation of Reform Judaism Membership Pledge Form

Family Contact Information			
ADULT ONE	Last Name:	First Name:	Title: Mr. Ms. Mrs. Dr.
ADULT TWO	Last Name:	First Name:	Title: Mr. Ms. Mrs. Dr.
CHILDREN'S NAMES			
ADDRESS	CITY	STATE	ZIP
CELL PHONE	HOME PHONE	EMAIL	

Step 1: Select Your Membership Pledge Level

Please select one of the following Membership Pledge Levels:

Supporting Membership

- Standard Family \$1,960
- One Person Household \$1,100
- Single Person* (21 - 29 yrs. old) \$320
- Single Person* (30 - 33 yrs. old) \$540
- Young Family* (21 - 29 yrs. old) \$540
- Young Family* (30 - 33 yrs. old) \$860
- Full Time Undergrad. Student (under age 24) *complimentary* & Active Duty Military Personnel (does not include lifecycle events)
(Please attach a copy of Student or Military ID)
*Building Fund, Security Assessment will be *waived* these Membership levels

Sustaining Membership

- Shomrim - Pillars \$13,500 & above
- Bonim - Builders \$8,800
- Platinum \$7,000
- Gold \$4,850
- Silver \$3,300
- Bronze \$2,475
- If you do not wish your name acknowledged on Sustaining Membership recognition opportunities, please check this box & your pledge will be listed as "anonymous."
Building Fund will be *waived* for all Sustaining Pledge Memberships

Pledge Assistance- financial hardship that prevent a member from paying full dues amount for the membership year will be reviewed on an individual basis by the Dues Committee

In order to obtain consideration level, please request a Pledge Assistance Form by calling the Executive Director, Michael Kancher, mkancher@crjorlando.org or 407-645-0444.

**** IN ADDITION TO completing a Pledge Relief Form, please attach any supporting documentation or information that may be of help to the Dues Committee in making a decision regarding total dues credit awarded. All financial information provided remains strictly confidential & is only reviewed by a member of the Dues Committee.**

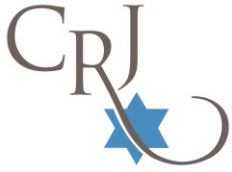
Step 2: Calculate Your Pledge Amount Total – Please note pre-printed amounts are NOT optional.

Please see 2nd page for a full explanation of fees

Membership Pledge – Please enter amount corresponding to above selection	\$
Building Fund – If you have already completed your commitment, please disregard this amount) \$ 300 <small>\$300 per year for five years for a total of \$1,500.</small>	\$ 300
Security Assessment -	\$ 100
Total Pledge Amount — <i>please total ALL amounts at right, including ALL the pre-printed amounts</i>	\$
ARZA – Family Membership \$36 – Separate check enclosed	\$

Step 3: Select Your Payment Method & Payment Frequency

<p style="text-align: center;">Payment Method – Choose one</p> <p><input type="checkbox"/> Electric Funds Transfer (See form)</p> <p><input type="checkbox"/> Credit Card (Please fill out authorization section below)</p> <p><input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express</p> <p><input type="checkbox"/> Discover</p> <p>Card number:</p> <p>□□□□ □□□□□□□□ □□□□□□</p> <p>Expiration date: □□/□□ CSV: □□□</p> <hr/> <p style="text-align: center;">Signature / Date</p>	<p style="text-align: center;">Payment Frequency – Choose one</p> <p><input type="checkbox"/> Monthly 15th _____ 30th _____</p> <p><input type="checkbox"/> Quarterly</p> <p><input type="checkbox"/> I would like to add 3% to my membership dues to cover the cost of credit card processing (voluntary)</p>
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"Every one shall give as he is able according to the blessing of Adonai, your God, which Adonai has given you." Deuteronomy 16:17

The Congregation of Reform Judaism is a **partnership among members** who support each other and the larger community. We hope that all our members find a comfortable Jewish home in the Temple. CRJ has always been welcoming to all Jews, regardless of their financial means. We intend to uphold this vital tradition, and to do so we need every family or household to do their best to help build our community. Below, please find a complete explanation of the various components of your Membership Pledge. Please do not hesitate to call the Executive Director, Michael Kancher, if you need additional clarification. **Thank you for being a part of our congregational family.**

Membership Pledge

We believe that a strong and vital Temple congregation benefits all of us, regardless of whether you are actively or only occasionally involved in Temple activities. All of us collectively, must see to it that the Temple is both financially and spiritually healthy. CRJ's membership pledge structure is responsive to member resources as is appropriate for our unique and diverse community. Membership pledge revenues are required to fund Temple operations and programs like the religious school, library, social action, etc. Please see the sections below for full explanations of those portions of your Total Pledge Amount.

Membership Pledge Relief:

No member will be turned away from our Temple community because of an inability to pay the Supporting Membership Pledge. In order to be considered for pledge relief, please fill out a Pledge Relief Form. Please attach a copy of the front page of the most recent year's tax return in addition to the Pledge Relief Form. You may be assured that any information you share during the Pledge Relief process will remain strictly confidential and is only reviewed by a member of the Dues Committee. Please contact Michael Kancher (mkancher@crjorlando.org) for more information.

Building Fund

The Building Fund was established to properly maintain our building. Every household makes an **equal** contribution to the Building Fund over the lifetime of their membership (typically paid over five years). The current Building Fund assessment is \$1,500, payable over five years or \$300 per year, per family. This amount is separate from and is not included in the Membership Pledge portion of the Total Pledge. You may inquire about your family's balance to the Building Fund contribution by contacting the Executive Director.

Security Assessment

At this time, we believe that it is important to maintain a high level of security on Temple grounds whenever there is a program, activity or function. To that end, CRJ uses the services of the off-duty Orange County Sheriff's Department to provide a secure environment in which the congregation can worship and participate in Temple activities. This year's Security Assessment of \$100 covers the costs of maintaining our security program and is required by all membership pledge categories (Supporting and Sustaining Levels)

ARZA/World Union

Our congregation strongly supports the work of ARZA/WORLD UNION. It is the representative body of the growing Reform Movement around the world and in Israel. As a member of ARZA/WORLD UNION your pledge helps to establish and support new Reform Jewish communities and congregations in Europe and in the Former Soviet Union, aid Jewish immigrants, support social service programs in Israel and in other countries where Jews are in need. Your support ensures equal rights for Reform Jews in Israel supports a Religious Action Center and staff working towards ensuring a pluralistic Jewish State. Although this is an OPTIONAL membership of \$36, we strongly encourage all CRJ members to become members of ARZA/WORLD UNION.