



2011-12 MEMBERSHIP APPLICATION

Full Names of Adult Member(s):

1. _____ 2. _____

Address: _____
 (Street) (City) (Zip)

Home Phone: _____ **Cell Phone #1:** _____ **Cell Phone #2:** _____

Phone Number for Kol Hadash Directory: _____

E-Mail #1: _____ **E-Mail #2:** _____

Unmarried children under 25:

	<u>Name</u>	<u>Date of Birth</u> (include year)	<u>Entering</u> <u>Grade</u>	<u>Enrolled in</u> <u>Sun. School?</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

We would like to include children's names and their current grades in our general membership directory. The directory is *only* for Kol Hadash members' use; we *do not* distribute the directory to any other organizations for any purpose. Please check below if you do not wish your children to be listed.
 _____ Please do not include my children's names in the directory.

Kol Hadash publishes birthdays each month in our Shofar newsletter, please check below if you would like your children's birthdays to be included
 _____ Please include my children's birthdays in the Shofar

How did you find out about Kol Hadash? How did you get more information? (circle all that apply)
 a) print ad b) website c) personal recommendation d) attended public program
 e) married by Rabbi Friedman or Rabbi Chalom f) mailing g) other

Are you related to other members of Kol Hadash? If yes, please list names:

Do you know anyone who might be interested in information about Kol Hadash or Humanistic Judaism? Please provide names and contact information.

ADDITIONAL MEMBERSHIP INFORMATION

*PLEASE COMPLETE THE REMAINING PAGES IN THIS PACKET.
THIS INFORMATION WILL HELP US SERVE YOU BETTER. . .THANK YOU!*

1. FRIDAY NIGHT SERVICE MEMORIAL/YAHRTZEIT INFORMATION

*In the month of the memorial anniversary,
we remind families that memorial names will be read at a Shabbat service.
All names to be read at the Yom Kippur Memorial service **MUST** be listed on page 3.*

<u>Name</u>	<u>Date of death (mm/dd/yyyy)</u>	<u>Relationship</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

2. SPECIAL DATES

Kol Hadash publishes upcoming birthdays, anniversaries, or other special days each month in our Shofar newsletter to help our members keep in touch with milestones in each other's lives. Would you like to participate? Please take a moment to include the important dates you would like to include:((MMDDYYYY)

Date of Birth #1: _____ **Date of Birth #2:** _____

Wedding Anniversary (if applicable): _____

3. ACTIVITIES

In which kinds of congregational activities are you interested?

- | | | |
|---|---|--|
| <input type="checkbox"/> High Holidays | <input type="checkbox"/> Shabbat Services | <input type="checkbox"/> Other Jewish Holiday Celebrations |
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Adult Social Events | <input type="checkbox"/> Community Service Projects |
| <input type="checkbox"/> Family Social Events | <input type="checkbox"/> Singing in the Choir | <input type="checkbox"/> Book Club |

Kol Hadash is an inclusive, volunteer organization. We encourage and welcome your participation in any of the following committees. Please indicate if you are interested, and we will contact you:

- Community Service Committee – Finds ways to do good in our local community
- Development Committee – Supervises/organizes ongoing fundraising activities and events
- Finance Committee – Makes decisions affecting congregational finances, future planning
- Helping Hands Committee – Reaches out to members in need
- Marketing Committee – Informs the congregation and the public of Kol Hadash events
- Membership Committee – Liaises with prospective members, new members, and current members
- Youth Education Committee – Oversees and supports the Sunday School and Hebrew School

PLEASE CONTINUE AND COMPLETE ALL PAGES

HIGH HOLIDAY REQUEST FORM

*See the enclosed High Holidays information sheet for full schedule and admission policy.
Everyone (members and the public) admitted to Children's and Memorial Service.*

**NOTE: you will not receive tickets in advance –
we will prepare nametags for each admission, and the nametags will function as your tickets.**

MEMBERS AND UNMARRIED CHILDREN UNDER 25 (included in membership dues):

I am requesting High Holiday admission for these adult members:

Members' Names (as you would like them printed on our name tags):

1. _____ 2. _____

I am requesting complimentary admission to adult services for my children between 6th grade and age 25:

Names: 1. _____ 3. _____

2. _____ 4. _____

**SUSTAINING MEMBERS ARE ENTITLED TO
FOUR COMPLIMENTARY GUEST ADMISSIONS FOR FAMILY OR OTHER GUESTS**

FAMILY GUEST ADMISSIONS AT \$65 EACH

I am requesting admission for other immediate family members (parents; adult children over the age of 25; married children and their spouses; grandparents; grandchildren 6th grade and older) at the rate of \$65 per ticket:

1. _____
Name Address City Zip

2. _____
Name Address City Zip

3. _____
Name Address City Zip

OTHER GUEST ADMISSIONS AT \$150 EACH

I am requesting admission for other guests at the rate of \$150 per person.

1. _____
Name Address City Zip

2. _____
Name Address City Zip

YOM KIPPUR MEMORIAL

I am requesting that the following names be read at the Yom Kippur Memorial service:

Please consider making a Yom Kippur Memorial donation to Kol Hadash if you are requesting memorial names be read at the Yom Kippur Memorial Service.

Names: 1. _____ 3. _____

2. _____ 4. _____

PLEASE CONTINUE ... COMPLETE ALL PAGES ...

PAYMENT SUMMARY

We welcome all who celebrate Humanistic Judaism. If you need a confidential dues accommodation, please contact our Membership Chair, Andrea Friedlander, through our office at 847-347-3003.

Type of Membership

(please check one)

- | | |
|--|--|
| <input type="checkbox"/> Family (\$2,035) | <input type="checkbox"/> Young Adult – under 35 (\$515) |
| <input type="checkbox"/> Family w/Senior (70 and older)
Optional Discount (\$1935) | |
| <input type="checkbox"/> Family w/Single head of household (\$1545) | <input type="checkbox"/> Out of Town (\$415- No Illinois Residence) |
| <input type="checkbox"/> Single (\$1020) | <input type="checkbox"/> Life Cycle Event by Rabbi Chalom/Friedman |
| <input type="checkbox"/> Single w/Senior (70 and older)
Optional Discount (\$970) | Trial Membership (\$310 - new members, one year only) |
| | <input type="checkbox"/> Sunday School Trial Membership (\$310 - new members, one year only, 5 th grade or below) |

Please pay at least 50% of membership dues by August 15, 2011 Dues Enclosed \$ _____

Donations

Sustaining Membership -- Add \$1,000

Includes four complimentary High Holiday admissions for family or other guests, as well as a free audio CD of a recent sermon by Rabbi Chalom. Sustaining memberships support Kol Hadash's growth and programming and enable us to welcome those who cannot afford full dues or Sunday School tuition. Any membership category can become a Sustaining Membership by adding \$1,000 to the standard dues rates listed above.

Sustaining \$ _____

Supporting Donations:

- \$500 supports one Friday Night Shabbat Service
- \$300 helps send a child to Sunday School
- \$150 helps us reach out to prospective members
- Other \$ _____

Supporting Donation \$ _____

Yom Kippur Memorial Donation

Please consider making a Yom Kippur Memorial donation to Kol Hadash if you are requesting memorial names be read at the Yom Kippur Memorial Service.

Yom Kippur Memorial Enclosed \$ _____

Total Donations Enclosed \$ _____

High Holiday Guest Admissions

(each admission covers ALL Services)

Family Guest Admissions # _____ @ \$65 per person \$ _____
Other Guest Admissions # _____ @ \$150 per person \$ _____

Total Guest Admissions Enclosed \$ _____

Youth Education Fees

(must be Kol Hadash members)

Sunday School (note: education fee includes yearbook and bagel snack)

Parent & Tot Program (ages 0-3) @ \$65/family \$ _____

Children Pre-K (ages 4-5) # _____ @ \$125/child \$ _____

Children K-10

First Child Enrolled @ \$420 \$ _____

Second Child Enrolled @ \$395 \$ _____

#__ Additional Children Enrolled @ \$370 per child \$ _____

Hebrew School/ B'nai Mitzvah Fees

Children 6th grade Hebrew School # _____ @ \$930/child \$ _____

Children 7th grade Hebrew School # _____ @ \$210/child \$ _____

B'nai Mitzvah fee # _____ @ \$875/child \$ _____

(due for Bar/Bat Mitzvah scheduled during 2011-2012 school year)

(Please pay at least 50% of education fees by August 15, 2011)

Total Youth Education Fees Enclosed \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

I understand my dues commitment is for one year of membership, from July 1, 2011 to June 30, 2012. I understand that Kol Hadash policy calls for at least 50% dues to be paid prior to August 15, 2011 and the balance paid prior to January 30, 2012

Member _____
(Please print)

Signature _____ **Date** _____

Please make checks payable to *Kol Hadash Humanistic Congregation*. Mail completed forms with payment to: Kol Hadash Humanistic Congregation, 175 Olde Half Day Road, Suite 123, Lincolnshire, IL 60069.

If you have any questions, please call 847/347-3003 or e-mail info@KolHadash.com We will soon be in touch and send you more information to welcome you to the congregation.

THANK YOU AND WELCOME TO KOL HADASH!