



Full Names of Adult Member(s):

#1. _____ #2. _____

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

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

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

Children Living at Home:

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

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 newsletter *The Shofar*. Please check below if you would like your children’s birthdays to be included

___ Please DO include my children’s birthdays in *The Shofar*

How did you find out about Kol Hadash?

Are you related to or friends with 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 newsletter The Shofar 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:

Date of Birth #1: _____ **Date of Birth #2:** _____
(Year is only required for Young Adult memberships – month and day only is fine for all others)

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 |

4. COMMITTEES

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 communities
- Development Committee – Leads our fundraising efforts
- Membership Committee – Recruits new members and stays in touch with existing members
- Youth Education Committee – Oversees and supports the Sunday School
- Helping Hands Committee – Reaches out to members in need

5. SPECIAL SKILLS AND/OR EXPERIENCE (that might be useful to the congregation):

HIGH HOLIDAY REQUEST FORM

See the enclosed High Holidays information sheet for full schedule and admission policy.

All members must reserve admission in advance for Adult Services.

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 (admission included in membership dues):

Name(s) as you want them to appear on your nametag(s):

#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: _____

PAYMENT SUMMARY

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

<u>Type of Membership</u> <i>(please check one)</i>	
<input type="checkbox"/> Family (\$1,975)	<input type="checkbox"/> Young Adult – under 35 (\$500)
<input type="checkbox"/> Family w/Senior *Discount (\$1,875)	<input type="checkbox"/> Out of Town (\$400- No Illinois Residence)
<input type="checkbox"/> Family w/Single head of household (\$1,500)	<input type="checkbox"/> Life Cycle Event by Rabbi Chalom/Friedman Trial Membership (\$300 - new members, one year only)
<input type="checkbox"/> Single (\$990)	<input type="checkbox"/> Sunday School Trial Membership (\$300 - new members, one year only, 5 th grade or below)
<input type="checkbox"/> Single w/Senior * Discount (\$940)	
*70 and older	

Please pay at least 50% of membership dues by August 10, 2010 Dues Enclosed \$ _____

<u>Donations</u>	
<u>Sustaining Membership -- Add \$1,000</u>	
<i>Includes four complimentary High Holiday admissions for family or other guests, as well as a free audio CD of Rabbi Chalom's greatest hits. 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.</i>	
Sustaining Enclosed \$ _____	
<u>Supporting Donations:</u>	
<input type="checkbox"/> \$500 could support one Friday Night Shabbat Service	
<input type="checkbox"/> \$300 could help send a child to Sunday School	
<input type="checkbox"/> \$150 could help us reach out to prospective members	
<input type="checkbox"/> Other \$ _____	
Supporting Donation Enclosed \$ _____	
<u>Yom Kippur Memorial Donation</u>	
<i>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.</i>	
Yom Kippur Memorial Donation Enclosed \$ _____	

<u>High Holiday Guest Admissions</u> <i>(each admission covers ALL Services)</i>		
Family Guest Admissions	# _____ @ \$65 per person	\$ _____
Other Guest Admissions	# _____ @ \$150 per person	\$ _____

TOTAL DUES, DONATIONS AND HIGH HOLIDAY TICKETS ENCLOSED \$ _____
ALMOST DONE . . . JUST ONE MORE PAGE TO GO!

YOUTH EDUCATION FEES

(must be Kol Hadash members)

Sunday School

Parent & Tot Program (ages 0-3) @ \$60/family \$ _____

Children Pre-K (ages 4-5) # _____ @ \$120/child \$ _____

Children K-10

(note: education fee includes yearbook and bagel snack)

First Child Enrolled @ \$405 \$ _____

Second Child Enrolled @ \$380 \$ _____

#__ Additional Children Enrolled @ \$355 per child \$ _____

Hebrew School/ B'nai Mitzvah Fees

Children 6th grade Hebrew School # _____ @ \$900/child \$ _____

Children 7th grade Hebrew School # _____ @ \$200/child \$ _____

B'nai Mitzvah fee # _____ @ \$850/child \$ _____

(due for Bar/Bat Mitzvah scheduled during 2010-11 school year)

(Please pay at least 50% of education fees by August 10, 2010)

Total Youth Education Fees Enclosed \$ _____

TOTAL DUES, DONATIONS AND HIGH HOLIDAY TICKETS ENCLOSED (from p. 4) \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

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I understand my dues commitment is for one year of membership, from July 1, 2010, to June 30, 2011. I understand that Kol Hadash policy calls for 50% dues to be paid prior to August 10, 2010, and the balance paid prior to January 30, 2011.

Member(s) _____

(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!