

Congregation Beth Shalom/NIJCC 2018-2019 Membership Form

Please return this form with your dues pledge and first payment no later than October 1, 2018.

This form is used for tax return donation letters, ha Shofar electronic mailings and other important communications.

Name: _____

Address: _____

Phones: Home _____ Cell #1 _____ Cell #2 _____

E-mails: Email #1 _____ E-mail #2 _____

Please rank (1, 2, 3) your preferred contact method: ___ Home phone ___ Cell phone ___ E-mail

Annual Dues (copied from other side) \$ _____

Additional Donations:

- a. Unrestricted \$ _____
(Congregation operating expenses)
- b. Raymond Katz Building Fund \$ _____
(Building maintenance and repair)
- c. Rabbi Fund \$ _____
(Current and future Rabbi salary)
- d. Rabbi Discretionary Fund \$ _____
(Used by the Rabbi for religious and educational purposes)
- e. Fox/Mabel Fund \$ _____
(Educational activities, incl. Religious School, library, camperships)
- f. Religious School \$ _____
(Religious School operating expenses)
- g. Community Fund \$ _____
(Hope Haven, members in need, and other community needs)
- h. DeKalb Food Pantry \$ _____
(Food for the needy in DeKalb County)
- i. Cemetery Fund \$ _____
(Maintenance and upgrade of Garden of Shalom Cemetery)
- j. Other purpose (describe below): \$ _____

TOTAL 2018-2019 PLEDGE \$ _____

Number of payments (check one please) ___ 1 Payment ___ 2 Payments ___ 3 Payments

To pay by credit card or PayPal, go to our web site, bethshalomdekalb.org, and click on "Donate".

Please return this completed form, whether paying by credit card or check, to:

**CONGREGATION BETH SHALOM
P.O. Box 1177
DeKalb, IL 60115**

The IRS requires that tax-exempt organizations return a receipt to each donor for all dues and donations so that the donor may utilize the tax deduction on his/her returns. A tax letter will be sent to you, at the address you provide above, no later than January 31, 2019.

Thank you for helping the Congregation to meet its financial obligations.

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DUES CATEGORY	ANNUAL DUES	PAYMENT OPTIONS
<u>If household income is:</u> Under \$25,000	<u>Your annual dues are:</u> Please pay \$275.00	<u>Check one Option</u> <input type="checkbox"/> One Payment of \$275 <input type="checkbox"/> Two Payments of \$142 each
\$ 25,000 - \$ 35,000	Please pay \$ 440.00	<input type="checkbox"/> One Payment of \$440 <input type="checkbox"/> Two payments of \$225 <input type="checkbox"/> Three payments of \$150
\$ 35,000 - \$50,000	Please pay \$ 585.00	<input type="checkbox"/> One Payment of \$585 <input type="checkbox"/> Two payments of \$295 each <input type="checkbox"/> Three payments of \$200 each
\$ 50,000 - \$75,000	Please pay \$ 720.00	<input type="checkbox"/> One Payment of \$720 <input type="checkbox"/> Two payments of \$365 each <input type="checkbox"/> Three payments of \$245 each
\$ 75,000 - \$100,000	Please pay \$ 900.00	<input type="checkbox"/> One Payment of \$900 <input type="checkbox"/> Two payments of \$455 each <input type="checkbox"/> Three payments of \$305 each
\$100,000 - \$125,000	Please pay \$ 1150.00	<input type="checkbox"/> One Payment of \$1150 <input type="checkbox"/> Two payments of \$580 each <input type="checkbox"/> Three payments of \$390 each
Over \$125,000	Please pay \$ 1400.00	<input type="checkbox"/> One Payment of \$1400 <input type="checkbox"/> Two payments of \$705 each <input type="checkbox"/> Three payments of \$470 each

Payments: One payment plan Payment is due by October 1
 Two payment plan Payments due by October 1 and December 1
 Three payment plan Payments due by October 1, December 1, and February 1

Please note that an additional charge is required for two and three payments to cover additional costs.

NO ONE WILL BE DENIED MEMBERSHIP FOR FINANCIAL REASONS

For special financial arrangements please e-mail the CBS Treasurer, at "Treasurer@BethShalomDeKalb.org".

All information is maintained in *strict confidence*.

Please fill out the next page of this form completely.

Please return this form even if you are not sending in your payment at this time.