

Temple Solel Annual Membership Commitment Form

Fiscal Year July 1, 2011 – June 30, 2012

(Please provide all information below so that we can update our records.)

Name(s): _____

Address: _____

Home phone: _____ **Work:** _____ **E-mail:** _____

Annual Membership Commitment

We ask you, based on an honest reflection of your own financial circumstances, to step up to the highest tier possible as we pursue a financially-strengthened future for our temple. Please indicate your membership commitment level below:

Member Category	Single	Family	Associate *
Rabbi's Circle	<input type="checkbox"/> 6,000	<input type="checkbox"/> 6,000	<input type="checkbox"/>
Benefactor	<input type="checkbox"/> 3,000	<input type="checkbox"/> 3,900	<input type="checkbox"/>
Pathfinder	<input type="checkbox"/> 1,975	<input type="checkbox"/> 2,475	<input type="checkbox"/>
Pillar	<input type="checkbox"/> 1,800	<input type="checkbox"/> 2,300	<input type="checkbox"/>
Sustaining	<input type="checkbox"/> 1,475	<input type="checkbox"/> 1,975	<input type="checkbox"/>
Retired <u>and</u> 65 or Older	<input type="checkbox"/> 860	<input type="checkbox"/> 1,250	<input type="checkbox"/>
Age 25 and Under	<input type="checkbox"/> FREE	<input type="checkbox"/> FREE	
Age 26-34 (Prorated)			
1 st Year (40% of Sustaining)	<input type="checkbox"/> 590	<input type="checkbox"/> 790	
2 nd Year (60% of Sustaining)	<input type="checkbox"/> 885	<input type="checkbox"/> 1,185	
3 rd Year (80% of Sustaining)	<input type="checkbox"/> 1,180	<input type="checkbox"/> 1,580	

* Associate membership is only available to those who pay full dues to another congregation which is their primary affiliation. Primary affiliation will be verified. Associate dues are 1/2 of the category you have chosen above. Please check the box under Associate and include a separate page with the name, address and phone number of your primary congregation.

Temple Solel policy states that all prior commitments must be paid in full by June 30, 2011. ***High Holiday tickets and Religious School class assignments will be issued only to those members who are current in dues or have made alternative arrangements approved by Temple Solel.***

Special Considerations

Temple Solel remains committed to being accessible to every person seeking Jewish community. It has always been our policy that financial capacity will never be a barrier to membership. Special payment arrangements may be granted to members experiencing a financial hardship. Please contact David Lamden, Executive Director (480.991.7414 or dlamden@templesolel.org), to learn about the confidential process and request a dues adjustment form.

Raker Religious School

School enrollment forms must be completed. Use this form only for calculating fees.

Ganeinu (ages 2-3) – Solel Member (\$200)**	_____	4 th –7 th Grade (\$980)**	_____
Ganeinu (ages 2-3) – Solel PS Child (\$132)**	_____	6 th Grade Bar/Bat Mitzvah Tutoring Fee (\$880)	_____
Parparim (Pre-K) – Solel Member (\$340)**	_____	8 th Grade (\$410)**	_____
Parparim (Pre-K) – Solel PS Child (\$200)**	_____	10 th Grade Confirmation Fee (\$200)**	_____
K-3 rd Grade (\$660)**	_____		

**** Apply \$50 Discount if Registered by 6/30/11 or if New Member – No Discount for Tutoring Fee**

Complete Back Side→

Temple Solel Annual Membership Commitment Form

Fiscal Year July 1, 2011 – June 30, 2012

Commitment Forms must be completed and returned to the Temple by June 30, 2011.

Temple Solel policy requires members to observe appropriate category minimums and payment options. If your form is not returned on time and you have not contacted the temple to arrange for a confidential dues adjustment, then your commitment will be set at the appropriate category minimum.

STEP 1: Your personal commitment

Annual Membership Commitment (from table on page 1)	\$ _____
BIMF (Building Improvement and Maintenance Fund) Building Fund commitment of \$1,250 billed at \$250 per year over a five-year period:	\$ _____
Raker Religious School Fees Total (from table on page 1)	\$ _____
Please Consider Making An Additional Gift	\$ _____
Total Commitment for Fiscal Year 2011/12	\$ _____





STEP 2: Choose a billing option (please check one)

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Annual payment (Due by July 31)	Semi-annual payments (Due by July 31 and January 31)	Quarterly payments (Due July 31, October 31, January 31 and April 30)	Nine Monthly payments (July – March)

STEP 3: Choose a payment option (please check one and fill in the information)

To improve payment ease and efficiency, the temple is pleased to provide three billing options – including a Direct Debit Payment program where we automatically debit, with your permission, your checking account.

Credit Card (enter information below)

<input type="checkbox"/>  Cards	<input type="checkbox"/> 
<input type="checkbox"/> 	<input type="checkbox"/> 

Account Number: _____

Exp (MM/YY): _____ CCV #: _____

Name on Card: _____

Billing Address: _____

City: _____ State: _____

Zip Code: _____

Print Name: _____

Signature: _____

Direct Debit Payment (enter information below)

JOHN DOE
1124 Maple St.
Tampa, FL 33602

Pay to the order of \$ _____ Dollars

YourBank
YourBank of Tampa
Tampa, FL

For

: 0001000100 0550051500 1101

Routing Number Account Number Check Number

Routing Number: Account Number:

Check

Date: _____

As a member of Temple Solel, I understand that I am making a full-year financial commitment to support the Congregation. I further understand that the temple depends on this commitment, and I pledge to fulfill my financial obligation on or before June 30, 2012. If I am unable to do so, I agree to contact Temple Solel's Executive Director to make alternative payment arrangements.

Signature

Date

Thank you for your involvement, your commitment and your support.