



Please return to: PO Box 720277, Jackson Heights NY 11372
Email: office@sznyc.org, Tel: 212-874-7005

Part 1: General Information

Member 1

Name: _____ Email*: _____

Street Address: _____ Apt: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Best time of day to call: _____

Gender: _____ Date of Birth: _____ Date of Marriage (if applicable): _____

Occupation and Place of Employment: _____

Jewish Communal Affiliations (if applicable): _____

Hebrew Name (including parents' names): _____

If converted, name of rabbi who officiated: _____

Bar/Bat Mitzvah Parashah and Rituals Performed (if applicable): _____

I am a: Kohen/Bat Kohen Levi/Bat Levi Yisrael I don't know

**Shaare Zedek sends regular correspondence by email; however, you may opt to receive all materials by postal service by checking here:*

Member 2

Name: _____ Email: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Best time of day to call: _____

Gender: _____ Date of Birth: _____

Occupation and Place of Employment: _____

Jewish Communal Affiliations (if applicable): _____

Hebrew Name (including parents' names): _____

If converted, name of rabbi who officiated: _____

Bar/Bat Mitzvah Parashah and Rituals Performed (if applicable): _____

I am a: Kohen/Bat Kohen Levi/Bat Levi Yisrael I don't know

Children in my household (who live at home):

Please list English and Hebrew names, birthday, gender, school and religious school (if applicable). Please let us know if any of your children have special needs (dietary or learning) that we should be aware of.

Yahrzeits (if applicable):

Please list English and Hebrew names, the person's relationship to you, and the secular and Hebrew date of deaths. Please indicate if a death occurred after nightfall.

Part 2: Skills and Volunteering

Do you have any skills or connections that may be helpful to Shaare Zedek? _____

Are you interested in any volunteer roles or tasks (e.g., event planning, fundraising, greeting, chesed/bikkur cholim, office or tech support, social action, etc.)? _____

Are you willing to perform any ritual roles (e.g. read Torah/Haftarah, lead services, serve as a gabbai, etc.)?

Would you like to learn any ritual roles? _____

Part 3: Interests and Wishes

1. Why did you decide to join Shaare Zedek? _____

2. How can Shaare Zedek best support you? _____

3. Is there anything else you would like us to know? _____

Part 4: Meal Planning

Help us understand your dietary needs when we plan communal meals like Shabbat dinners and kiddush lunches. Please specify any restrictions here:

- Dairy free Vegetarian / vegetarian + fish / vegan (circle one)
 Gluten free Other allergies or restrictions: _____

Part 5: Membership Dues and Voluntary Giving

Thank you for contributing to the financial health of our community through membership. *We are committed to ensuring that no one is excluded due to financial hardship.* If circumstances prevent you from paying your dues in full, please contact Joshua Newman at membership@sznyc.org or Michael Firestone at president@sznyc.org. Dues may be paid in installments. All dues information will be kept in strictest confidence.

My Household's Dues: *Please refer to the dues categories and schedule on page 5.* \$ _____

- Standard Young Professional Student Community Non-Resident

My Additional Donation(s):

General Fund: We'll use your gift where it's needed most. \$ _____

Kiddush Fund: Help us provide Shabbat kiddush lunches year-round. \$ _____
\$180 suggested per adult or \$360 per household (just \$3 per week!)

Chesed Fund: Direct your gift to those needing extra support. \$ _____

Adult Education: Fund speakers and other learning events. \$ _____

Children's Programming \$ _____

Rabbi's Discretionary Fund \$ _____

Other: _____ \$ _____

TOTAL PAYMENT: \$ _____

Form of Payment

CHECK INCLUDED (payable to *Congregation Shaare Zedek*)

Amount enclosed: \$ _____

Balance (if any): \$ _____

CREDIT CARD: I authorize Shaare Zedek to charge the following

Visa

MasterCard

in the amount of \$ _____ + 3% *handling fee for credit card payments*

Credit Card Number _____

Expiration Date _____

If you would like to make a donation of securities (stocks, mutual funds, bonds, etc.), please contact our Treasurer, Jeff Weinstein, at treasurer@sznyc.org to receive instructions for a transfer.

Have you considered planned giving? To discuss options, please contact Michael Firestone: president@sznyc.org.

Reserve a Meal Sponsorship

I would like to sponsor or co-sponsor a communal kiddush lunch on the following date(s):

in honor/memory of: _____

Our office staff will follow up with you to discuss menu options and payment.

Photography Release Statement. Shaare Zedek may have photographs or videos taken during community events that are not held on Shabbat or Yom Tov. These photographs will be used only for the shul's promotional materials, which include online content (e.g., website, Facebook) and print content (e.g., ads, flyers, brochures). Please check the box below to indicate your preference for using pictures/videos of you or your family members in these materials.

I authorize Shaare Zedek to use photographs that include any member of my household.

I authorize Shaare Zedek to use photographs that include only the adults in my household, but not children.

I do not authorize Shaare Zedek to use photographs that include any member of my household.

Thank you for joining the Shaare Zedek community!

Congregation Shaare Zedek – Membership Categories & Dues 2023-2024

Revised May 2016

Members play a critical role in sustaining and growing our community. We rely on dues to help meet our annual financial obligations. Your dues pay salaries, fund programming for adults and children, and ensure that a minyan is here when you need it.

Shaare Zedek uses a “Fair Share” dues system for membership based on household income. You will not be asked to disclose your income or submit any financial documents, but only to accept those dues that are applicable to you within the ranges below (approximately between 1-2% of your household’s annual income). We ask you to pledge as honestly and as accurately as possible.

1 - Standard Membership

- Includes 1 High Holiday ticket for each household family member

Household Gross Income	Dues Range
< \$30,000	\$180 - 400
\$30,000 – \$39,999	\$180 - 600
\$40,000 – \$49,999	\$180 - 800
\$50,000 – \$59,999	\$500 - 1,000
\$60,000 – \$69,999	\$600 - 1,200
\$70,000 – \$84,999	\$700 - 1,400
\$85,000 – \$99,999	\$850 - 1,700
\$100,000 – \$124,999	\$1,000 - 2,000

Household Gross Income	Dues Range
\$125,000 – \$149,999	\$1,250 - 2,500
\$150,000 – \$174,999	\$1,500 - 3,000
\$175,000 – \$199,999	\$1,750 - 3,500
\$200,000 – \$224,999	\$2,000 - 4,000
\$225,000 – \$249,999	\$2,250 - 4,500
\$250,000 – \$274,999	\$2,500 – 5,000
\$275,000 – \$299,999	\$2,750 – 5,500
\$300,000+	\$3,000 – 6,000

2 - Student Membership

- \$36 for *full-time* undergraduate and graduate students
- Does not include High Holiday tickets

3 - Young Professionals (young adults ages 30 and under)

- \$180 for an individual or \$360 for a family
- Includes 1 High Holiday ticket per household member

4 - Community Membership

- \$500 for households that are members in good standing at another local synagogue
- Eligible for membership discounts
- Includes 1 High Holiday ticket per household member

5 - Non-Resident Membership

- \$180 for households living outside of Manhattan
- Does not include High Holiday tickets