

## 2018-2019 MEMBERSHIP RENEWAL & DUES COMMITMENT WORKSHEET

KAM Isaiah Israel welcomes everyone as members. Your dues commitment makes all of our programming and events possible. Please call 773.924.1234 or email [kamii@kamii.org](mailto:kamii@kamii.org) to make or renew a special dues arrangement. Please note that **all special dues arrangements must be renewed every year.**

To receive High Holy Day tickets, your dues must be paid-in-full for 2017-2018 and you must pay 25% of your 2018-2019 dues by August 31, 2018. **Thank you for your support!**

**MEMBERSHIP CONTACT or HOUSEHOLD NAME:** \_\_\_\_\_

<b>Standard Level</b>	
Family	\$3,100
Single	\$1,900
<b>Supporting Level</b>	
Family	\$3,800
Single	\$2,300
<b>Sustaining Level</b>	
Family	\$4,700
Single	\$2,800
<b>Enhanced Dues</b>	
Supporter includes all fundraising solicitations and monthly congregational dinners, including holidays	\$6,000
Pillar includes all benefits above, plus the Spring Benefit and Religious School tuition	\$7,500
Leader includes all benefits above, plus the congregational retreat	\$10,000
Patron includes all benefits above, plus facility rentals	\$20,000+
<b>Other Membership Levels</b>	
Associate members longtime members who move from metro-Chicago and would like to continue supporting the congregation	\$325
Affiliate members local members of another synagogue (does not include High Holy Day tickets)	\$325
Student members for full-time students (includes High Holy Day tickets)	\$100
<b>Optional Additions</b>	
Congregational Dinner Subscriptions includes monthly Shabbat dinners & Purim: _____ subscriptions at \$100 per person ages 4 and up	\$ _____
Additional Contribution special designation or note: _____	\$ _____

**TOTAL 2018-2019 PLEDGE**

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**Payment type:**

**Check**

**Electronic Funds Transfer (EFT)**  
Please complete the information below.

**Credit Card (add 3.5% fee)**  
Please complete the information below.

**TOTAL**  
(from front) = \_\_\_\_\_

**+ 3.5% FEE**  
(if paying by credit card) = \_\_\_\_\_

**One-time annual payment**  
My full payment for 2018-19 is enclosed.

**Payment by installments**  
I will pay \_\_\_\_\_ installments of \$ \_\_\_\_\_ each  
between July 1, 2018 and June 30, 2019.

**ELECTRONIC FUNDS TRANSFER AUTHORIZATION**

Electronic Funds Transfers allow you to make payments conveniently and keep our costs down. This authorization will remain in effect beginning on the date specified below until you update the status and/or terms with KAM Isaiah Israel Congregation. A record of charges or transfer will appear on your statement, which will serve as your receipt. You will receive email notice from our office 2 to 3 weeks in advance of the transfer date showing the next amount to be debited. Please contact us by phone at 773.924.1234 or email at [kamii@kamii.org](mailto:kamii@kamii.org) if you wish to cancel a scheduled payment. If there is any error, you must notify KAM Isaiah Israel within 15 days of the statement date or within 45 days after the charge was made. Any disputes will be handled directly between you and KAM Isaiah Israel. KAM Isaiah Israel is authorized to make adjustments or entries to correct errors.

I/We hereby authorize KAM Isaiah Israel to initiate debit entries to my/our checking account indicated at the bank listed below for my/our financial obligations on the 20th day of each month or on the next business day.

**BANK NAME:** \_\_\_\_\_ **CITY, STATE, ZIP CODE:** \_\_\_\_\_

**ROUTING NUMBER:** \_\_\_\_\_ **ACCOUNT NUMBER:** \_\_\_\_\_

**CONTACT NAME(S):** \_\_\_\_\_  
(please print - sign below)

**AUTHORIZING SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CREDIT CARD AUTHORIZATION**

**NAME ON CARD:** \_\_\_\_\_ **BILLING ZIP CODE:** \_\_\_\_\_

**CARD NUMBER:** \_\_\_\_\_ **EXPIRES:** \_\_\_\_\_ **SECURITY CODE:** \_\_\_\_\_

I authorize KAM Isaiah Israel to initiate payments on my credit card in the amounts and at the intervals specified above.

**AUTHORIZING SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

Please return your completed form by mail to:

**KAM Isaiah Israel**  
**1100 E. Hyde Park Boulevard**  
**Chicago, IL 60615**

Or email to [kamii@kamii.org](mailto:kamii@kamii.org). Questions? Call our office at 773.924.1234.