



MEMBERSHIP APPLICATION

Congregation Agudas Achim

16550 Huebner Road
San Antonio, TX 78248

Phone: 210-479-0307

Fax: 210-479-0295

E-mail: info@agudas-achim.org

Website: www.agudas-achim.org

Welcome to the Agudas Achim family! Your participation and active involvement is a most valuable asset to us as we hope it will become for you as well. Please complete this application and return to the above address.

Date ____/____/____

Name(s) _____
Please include titles, such as Mr., Mrs., Dr., Maj., etc.

Informal Name(s) _____

Home Address _____
City State Zip

Home Phone _____ Fax _____

Marital Status (*please check*): Single Divorced Widowed Married, Date ____/____/____ Other
 Engaged, Proposed Marriage Date ____/____/____

Please complete the following information for the adult(s) applying for membership:

Full Name (include birth name) _____ Male Female

Hebrew Name (*written in English*) _____ Kohan Levi Yisroel

Date of Birth ____/____/____ Place of Birth _____ Bar/Bat Mitzvah ____/____/____

Religious tradition in which you were raised: Conservative Orthodox Reform Non-Jewish
 None Secular, Non-Practicing

Jewish by choice: Conversion Date ____/____/____ Conversion Rabbi _____

Conversion Location _____ Conservative Orthodox Reform

Occupation _____

Business Name & Address _____

Business Phone _____ Cell Phone _____ E-mail _____

Education (*check all that apply*): High School College Graduate School Other _____

Highest Degree: Bachelors Masters Doctorate Other _____

College(s) Attended _____

Major Field _____ Military: Active Retired

Which of these children will be attending our Religious School?

Bar/Bat Mitzvah, Confirmation Date(s):

Name _____ B/M Date ____/____/____ Confirmation Date ____/____/____

Name _____ B/M Date ____/____/____ Confirmation Date ____/____/____

Name _____ B/M Date ____/____/____ Confirmation Date ____/____/____

Name _____ B/M Date ____/____/____ Confirmation Date ____/____/____

Children married, at college or living independently:

<u>NAME</u>	<u>HEBREW NAME</u>	<u>SEX</u>	<u>DATE OF BIRTH</u>
_____	_____	____	____/____/____
_____	_____	____	____/____/____
_____	_____	____	____/____/____
_____	_____	____	____/____/____

To receive notification reminder of Yartzheit date(s), please list information below:

Name _____	Relationship _____	Date of Passing ____/____/____	Night ____
Name _____	Relationship _____	Date of Passing ____/____/____	Night ____
Name _____	Relationship _____	Date of Passing ____/____/____	Night ____
Name _____	Relationship _____	Date of Passing ____/____/____	Night ____
Name _____	Relationship _____	Date of Passing ____/____/____	Night ____

Do you own a cemetery plot? _____ Location _____

Your involvement is welcomed in all areas of synagogue life. Please indicate Member A (A), Member B (B) or both (A-B) in the space provided in the following lists:

Willing and able to: Participate in services _____ Read Hebrew _____ Read Torah _____
 Chant Haftarah _____ Lead a Morning Minyan or Shabbat service _____
 Help make a Minyan in the synagogue _____ Help make a Minyan during a Shiva period _____

I (we) would like to serve on the committee(s) as indicated:

_____ Adult Education _____ Cemetery _____ Communications _____ Constitution
 _____ Dues/Accounts _____ Finance/Budget _____ Fundraising _____ House _____ Library
 _____ Membership _____ Personnel _____ Programs _____ Publicity/Public Relations
 _____ Ritual _____ School _____ Youth/Young Adult

Please list any other skills, experiences, areas of interest or training that may be beneficial to our synagogue:

CONGREGATION AGUDAS ACHIM

ANNUAL COMMITMENT

The annual commitment to Congregation Agudas Achim includes Synagogue membership for the member, their spouse and dependent children, High Holy Day tickets, eligibility to attend our Inda Posner Religious School (fees are additional), a discounted rate at our Heintz Preschool and a discounted rate on the purchase of cemetery plots in our Memorial Gardens Cemetery.

All completed membership applications are submitted to the Accounts Review Committee for consideration. The Committee passes its recommendation on to the Board of Trustees for final action. **Board approval must be obtained before membership is finalized.** If the Committee feels that an application requires additional discussion, contact will be made with the prospective member before the recommendation reaches the Board.

Membership continues until notice of resignation, in writing, is received by the Executive Director.

- * **Annual Membership Dues.** The Annual Membership Dues structure at Congregation Agudas Achim is a flat rate based on age and member household (see chart below). Congregation Agudas Achim welcomes levels greater than the flat rate category. Provisions for deviations below the flat rate category will be considered in a confidential manner by the Accounts Review Committee. Every member of our Congregation is asked to reassess their commitment on an annual basis.
- * **Building Maintenance and Security Fee.** This annual fee is used to defray the cost of non-budgeted improvements to the building and grounds. This amount is **10% of annual membership dues per year** up to \$240. This fee is assessed annually for all members, with the exception of Associate members. **The Building Maintenance and Security Fee is due within 30 days of assessment.**
- * **Application Deposit.** This application form must be accompanied by a deposit equivalent to 3 months of Annual Membership Dues. In the unlikely event that membership is not approved, the deposit will be refunded. **Synagogue policy precludes processing this application without the deposit.**
- * **Dual Membership.** If the prospective member has Primary membership at another San Antonio synagogue, the annual membership dues will be 50% of the annual dues at the Primary synagogue (i.e. \$1,000 x 50% = \$500). Building Maintenance and Security Fee will be assessed.
- * **Associate/Out of State Membership.** This membership category is only available to prospective members who are not residents in the San Antonio area. No Building Maintenance and Security Fee is assessed.

ANNUAL MEMBERSHIP DUES RATES —PLEASE CIRCLE ONE—

Member Household	Age 28 or younger		29 - 34		35 - 74		75+	
	Annual	Monthly	Annual	Monthly	Annual	Monthly	Annual	Monthly
Single	\$500	\$41.67	\$1,000	\$83.34	\$1,500	\$125	\$750	\$62.50
Couple	\$900	\$75	\$1,500	\$125	\$2,000	\$166.67	\$1,250	\$104.17
Family	\$1,000	\$83.34	\$2,000	\$166.67	\$2,400	\$200		
Single Parent w/ children	\$750	\$62.50	\$1,500	\$125	\$2,000	\$166.67		
Benefactor and Other Categories (Any Age)								
Double Chai	Lion of Israel	Ner Tamid	Jerusalem	Malach	Associate	Dual		
\$3,600	\$4,500	\$5,400	\$7,500	\$10,000	\$200 for members who live outside the San Antonio area	50% of amount paid for primary membership elsewhere in San Antonio		

I (We) hereby apply for admission as a member of Congregation Agudas Achim, and will abide by its Constitution, By-Laws, Rules and Regulations. I (We) agree to pay the following:

Annual Membership Dues: \$ _____

Building Maintenance and Security Fee (annual): \$ _____

Total Annual Commitment: \$ _____

Signed _____

Date _____

Signed _____

Date _____

Application Deposit: Received by _____ on _____ for \$ _____.

Revised on 3/30/11