

Thank you for renewing your membership in
Kolot Chayeinu/Voices of Our Lives

If you prefer to RENEW ONLINE, please go to www.kolotchayeinu.org/membership

Yes, I want to renew my membership at Kolot Chayeinu for 5777 (Sept 2016 - Aug 2017)

Select Membership Type: One adult member in household **OR** Two adult members in household

Name of member _____

Name of second member or Non-member partner _____

Address _____ City _____ State _____ ZIP _____

E-mail: _____ Phone (____) _____

Please indicate your membership pledge on the reverse side.

The personal and financial information Kolot Chayeinu members share with the congregation is handled with the utmost care. Only a small number of Kolot staff and Board members have access to this information, and they maintain confidentiality as part of their responsibility for fiscal oversight, financial planning and fundraising for the congregation. Financial information is never made public except by special arrangement and consent of the contributor. If you have any concerns about your personal or financial information, please contact the Rabbi (rabbi@kolotchayeinu.org), President (president@kolotchayeinu.org), or Executive Director (scott@kolotchayeinu.org).

Mail to: Kolot Chayeinu, 540 President St. 3rd Floor, Brooklyn, NY 11215

or pay online at www.kolotchayeinu.org

MEMBERSHIP PLEDGES & PAYMENTS

Kolot Membership Dues may be paid in any installment or arrangement that meets your needs. To assist with our budget planning and financial management, a portion of your dues must be paid by **December 31, 2016**, and dues must be paid in full by **June 30, 2017**.

Many members ask what it costs to run Kolot per member per year. For the year 5777, if every current member pledged \$2,295 Kolot would cover our budgeted expenses of \$952,500. A reminder: Membership dues are not refundable and, as with most other contributions to Kolot, they are **tax deductible!**

5777 MEMBERSHIP FAIR SHARE DUES PER MEMBER -- BY EACH MEMBER'S INCOME RANGE, AS FOLLOWS:

If your annual gross income falls between	Please pay dues in the amount of		If your annual gross income falls between	Please pay dues in the amount of	
	Member 1	Member 2		Member 1	Member 2
\$0 - \$25,000	<input type="checkbox"/> \$350	<input type="checkbox"/> \$350	\$100,001 - \$125,000	<input type="checkbox"/> \$1,700	<input type="checkbox"/> \$1,700
\$25,001 - \$35,000	<input type="checkbox"/> \$550	<input type="checkbox"/> \$550	\$125,001 - \$150,000	<input type="checkbox"/> \$1,900	<input type="checkbox"/> \$1,900
\$35,001 - \$45,000	<input type="checkbox"/> \$650	<input type="checkbox"/> \$650	\$150,001 - \$175,000	<input type="checkbox"/> \$2,200	<input type="checkbox"/> \$2,200
\$45,001 - \$57,000	<input type="checkbox"/> \$800	<input type="checkbox"/> \$800	\$175,001 - \$200,000	<input type="checkbox"/> \$2,600	<input type="checkbox"/> \$2,600
\$57,001 - \$70,000	<input type="checkbox"/> \$1,000	<input type="checkbox"/> \$1,000	\$200,001 - \$350,000	<input type="checkbox"/> \$3,200	<input type="checkbox"/> \$3,200
\$70,001 - \$85,000	<input type="checkbox"/> \$1,200	<input type="checkbox"/> \$1,200	\$350,001 - \$500,000	<input type="checkbox"/> \$3,400	<input type="checkbox"/> \$3,400
\$85,001 - \$100,000	<input type="checkbox"/> \$1,400	<input type="checkbox"/> \$1,400	\$500,001 and above	<input type="checkbox"/> \$3,600	<input type="checkbox"/> \$3,600