

## 2009-2010 (5770) MEMBERSHIP FORM

**Adult Member #1**

Name \_\_\_\_\_  
Last First Middle

Hebrew name \_\_\_\_\_ Date of birth \_\_\_\_\_

Occupation \_\_\_\_\_ Work phone \_\_\_\_\_

Skills and interests \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Area code Phone number

**Adult Member #2**

Name \_\_\_\_\_  
Last First Middle

Hebrew name \_\_\_\_\_ Date of birth \_\_\_\_\_

Occupation \_\_\_\_\_ Work phone \_\_\_\_\_

Skills and interests \_\_\_\_\_

Relationship of Member 1 to Member 2 \_\_\_\_\_

Anniversary date \_\_\_\_\_

**Children**

Name	Hebrew name	Date of birth	Gender		Lives at home?	
			M	F	Yes	No

**Yahrzeits**

Name	Relationship	English date and year

Based on the information we are furnishing, we seek to be defined as (circle the type of membership you wish to be defined as):

Membership	Chai	Family	Single Parent Family	Senior <sup>1</sup> Family	Single	Senior <sup>1</sup> Single	Student Single	Kfar* Over 20 Under 30	Out of town/ bulletin only	Associate
Annually	\$2,700	\$1,380	\$960	\$800	\$720	\$360	\$200	\$200	\$200	50% less than the amount of the category you qualify under. You will not have voting rights at annual meetings.

### PAYMENT OPTIONS

Please place a circle around the column with your preferred payment option.

Option	Annual	Quarterly	Monthly
Payment Amount	Full Amount	25%	1/12
Payment Due	July	July October January April	July - June

IF YOU ARE BILLED ON A MONTHLY SCHEDULE ONLY CREDIT CARD PAYMENTS WILL BE ACCEPTED.

\* Kfar means village. If you are between 20 and 30 please ask for a form about this category.

<sup>1</sup> Senior memberships are available for any individual in a family or single who is age 65 or older by July 1, 2010.

Congregation Kol Ami policy is to not refuse anyone due to financial restraints. Contact the Treasurer. All inquiries of dues and financial data are kept strictly confidential.

\_\_\_\_\_  
Signature Adult Member #1

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Adult Member #2

\_\_\_\_\_  
Date

Direct questions to the Congregation Kol Ami office: (360) 896-8088. Please mail this form with your dues payment to: Congregation Kol Ami, 1006-B NE 146<sup>th</sup> Street, Vancouver, WA 98685.

### Financial Issues

*If your family has serious financial issues and cannot pay the monthly amounts indicated, please call the office.*