Kindergarten to 2nd Grade Connections Membership – (2 Adult or more Household)

The Membership Commitment at Westchester Reform Temple is typically made up of three components:

- Annual Membership Commitment
- Annual Security Fee
- Campus Renewal Fund (formerly known as the Building Fund) contribution payable over six years

If your eldest child is in Grades K-2 in September 2022, to join WRT:

- There is **no annual Membership Commitment**
- There is a required **payment of the annual Security Fee** ($400 per family)
- There is a required **payment of the Campus Renewal Fund** which supports our ongoing facility's needs ($5,000 payable over six years -- $833.33/year)

Please note, there is a **SIGNIFICANT** Campus Renewal Fund savings for families who take advantage of the Connections Membership and join WRT while their eldest child is in Grades K-2. If a family defers Membership until their eldest child is in Third Grade, the Campus Renewal Fund rate goes up to $7,500 payable over six years ($1,250/year).

For those families whose eldest child will be entering 3rd grade in September 2023, you must act by December 31, 2022 in order to be eligible for the significantly discounted rate of $5,000 for the Campus Renewal Fund - Membership forms and the first Campus Renewal Fund payment must be received by December 31, 2022.

Only send back the Connections Membership Form, if you have already sent in a Campus Renewal Fund Form and/or New Membership Form. New Members are required to fill-out and return all forms.

Westchester Reform Temple
255 Mamaroneck Rd., Scarsdale, NY 10583
914-723-7727 Fax: 914-723-5946 www.wrtemple.org

Annual Membership

July 1, 2022—June 30, 2023
(Fiscal Year 2023)

2-Adult Connections Membership

"And they shall make Me a sanctuary and I will dwell in their midst..." *(Exodus 24:8)*

Stay tuned for a Fall invitation to participate in Inspired Giving, the Annual Fund of Westchester Reform Temple. We hope we can count on you to join the growing number of WRT members who are helping to build and support our future through philanthropy. Please contact our Director of Institutional Advancement, Hila Reichman, at hila.reichman@wrtemple.org, if you'd like to know more about Inspired Giving and how you can get involved.

(Optional) ***You can complete your membership and make your payment online at www.wrtemple.org/join/.***

Are you Renewing your Membership, or a New Member? ☐ Renewing Membership ☐ New Membership

(please print clearly)

Full Name (Adult One): _____ Email:_____

Full Name (Adult Two): _____ Email:_____

Address: _____, _____, _____, _____
(street) *(city)* *(state)* *(ZIP code)*

Home Phone#: _____ Adult One Cell#:_____ Adult Two Cell#:_____

Grade level of my eldest child for 2022-2023 School Year is: ☐ Pre-K or Younger or ☐ Kindergarten to 2nd Grade
Please note if your eldest child is in 3rd Grade or higher, you will need to submit a standard Membership Form.

Total Amount Pledged for 2022-2023:

Membership (2 Adult):	$	0.
Security Fee (2 Adult):	$	400.
subtotal:	$	400.
ARZA (*optional*):	$	_____
WRJ (*optional*):	$	_____
MRJ (*optional*):	$	_____
TOTAL AMOUNT *:	$	_____

**Tax Deductible subject to advice from you Tax Advisor*

OPTIONAL: *(please check opted-in box)*

☐ ARZA *(Association of Reform Zionists of America)*
$50. Supporting the Reform Movement in Israel.

☐ WRJ *(Women of Reform Judaism)*
☐ $54. (member) ☐ $118. (sponsor) ☐ $180. (patron)

☐ MRJ *(Men of Reform Judaism)*
☐ $36. (new member) ☐ $72. (returning member)
☐ $100. (contributing member)

PAYMENT OPTIONS: ☐ FULL PAYMENT or ☐ PARTIAL (50% minimum) **Amount enclosed:**_____

OPTIONAL: Credit card, ACH, and Securities payments may be made online at www.wrtemple.org, but **please return this form for our records** to: Westchester Reform Temple, Attn: Accounting Office, 255 Mamaroneck Road, Scarsdale, NY 10583.

☐ We will pay by transfer of securities. Please send us the current Securities Form by ☐ Mail or ☐ Email

☐ We will pay by Donor Advised Funds. Name of Fund:_____

We agree to pay in full by December 31, 2022:

_____
Signature

_____
Date

Please note:
- **WRT Membership is renewable on a yearly basis.** We are pleased to send High Holidays Entrance Cards to all members who have renewed their Membership Commitment and have brought their account into good standing.
- **If you have any questions with regard to Financial Assistance**, please contact Eli Kornreich, Executive Director, at Eli.Kornreich@wrtemple.org or 914-723-7727, ext. 8105.
- **Photo Release**: From time to time, WRT may use photographs or video of participants, with or without a name, for such purposes as publicity, illustration, advertising, and online content. You may withhold your permission for such use by contacting Hillary Fontana at 914-468-0523 or Hillary.Fontana@wrtemple.org.

Westchester Reform Temple
255 Mamaroneck Rd., Scarsdale, NY 10583
914-723-7727 Fax: 914-723-5946 www.wrtemple.org

Campus Renewal Fund (CRF) for Connections Membership

July 1, 2019—June 30, 2020

(2 Adult or more Household)

Name: _____
Adult Member(s) First and Last Name(s)

Address: _____

Email: _____

Phone: _____

All new members of Westchester Reform Temple ("WRT") are asked to make a Campus Renewal Fund contribution to help support the ongoing needs of our facilities. The current Standard rate for the Campus Renewal Fund is $7,500, payable over six years, at $1,250 per year. **As part of our Connections Membership program, you are eligible for a reduced rate for your WRT Campus Renewal Fund contribution.**

For families whose eldest child is enrolled in WRT's Early Childhood Center (ECC) program in the fall, the Campus Renewal Fund contribution may be deferred until the Membership year in which your eldest child enters Kindergarten. However, there is a significant savings for such families who take on the Campus Renewal Fund obligation before your eldest child enters Kindergarten.

NOTE: New WRT Members who have paid a Building Fund to another Temple are entitled to a reduction in their Campus Renewal Fund obligation to WRT.

To renew and maintain our Temple facility, we hereby promise and agree to pay a CAMPUS RENEWAL FUND to WESTCHESTER REFORM TEMPLE for the sum of (check one option):

Grade level of eldest child (2022 - 2023 School Year)	**One-Time Commitment** (Payable over 6 years)
☐ **Pre-K or Younger**	$ 3,750 ($625.00 / year)
☐ **Kindergarten to 2nd Grade**	$ 5,000 ($833.33 / year)
☐ **3rd Grade or Higher**	$ 7,500 ($1,250.00 / year)
☐ **My eldest child attends the ECC and I choose to defer my CRF until a later date, understanding that I will not receive the discounted rate if I defer payment until the year my eldest child enters Kindergarten**	
TOTAL CRF FOR THE FISCAL YEAR 2022—2023	$_____

_____ _____
Member(s) Signature(s): Date

For any questions or to discuss financial assistance or a Building Fund previously paid to another Temple, please contact Eli Kornreich (WRT Executive Director) at Eli.Kornreich@wrtemple.org or 914-723-7727, ext. 8105

Account ID# (Office use only):

Westchester Reform Temple

Family Name (Account Name)

☐ Married ☐ Single ☐ Divorced/Separated ☐ Domestic Partners hip

Marriage Date _____/_____/_____

ADULT MEMBER 1

☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ (other)_____

Birthdate _____/_____/_____

First Name | Last Name

Nickname (Optional—preferred name) | Maiden Name

(Primary Residence) Address | City | State | Zip code

(Secondary Residence) Address | City | State | Zip code

Home Phone # | Fax Phone #

Cell Phone # | Email

Business Name / Employer | Occupation

Business Address | City | State | Zip code

Business Phone # | Business Email

ADULT MEMBER 2

☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. ☐ (other)_____

Birthdate _____/_____/_____

First Name | Last Name

Nickname (Optional—preferred name) | Maiden Name

Cell Phone # | Email

Business Name / Employer | Occupation

Business Address | City | State | Zip code

Business Phone # | Business Email

CHILDREN

1. Full Name | Hebrew Name *(if known)* | ____/____/____ Birthdate | _____ Gender

2. Full Name | Hebrew Name *(if known)* | ____/____/____ Birthdate | _____ Gender

3. Full Name | Hebrew Name *(if known)* | ____/____/____ Birthdate | _____ Gender

4. Full Name | Hebrew Name *(if known)* | ____/____/____ Birthdate | _____ Gender

IF DIVORCED OF SEPARATED, CHILD(REN)'S OTHER PARENT:

Parent Full Name: | Child(ren)'s Name(s):

Address: | Phone #:

RELATIVES WHO ARE OR HAVE BEEN MEMBERS OF WESTCHESTER REFORM TEMPLE:

Full Name: | Relationship

Full Name: | Relationship

FAMILY EMERGENCY CONTACT:

Name: _____ Phone #:_____ Relationship:_____

PLEASE FILL-IN REVERSE SIDE...

ADULT MEMBER 1

RELIGIOUS TRADITION / BACKGROUND: ☐ Reform ☐ Conservative ☐ Orthodox

☐ Jewish by Choice: Conversion Date _____ ☐ Non-Denominational ☐ Other Religion:_____

Hebrew Name *(if known)* : _____

JEWISH EDUCATION: Bar/Bat Mitzvah: ☐Yes ☐No Confirmation: ☐Yes ☐No Read Hebrew?: ☐Yes ☐No

YAHRZEIT REMINDERS : Please remind me of these dates by: ☐ English Calendar ☐ Hebrew Calendar

	Full Name	Relationship	Date of Death
1.			
2.			
3.			
4.			
5.			
6.			

ADULT MEMBER 2

RELIGIOUS TRADITION / BACKGROUND: ☐ Reform ☐ Conservative ☐ Orthodox

☐ Jewish by Choice: Conversion Date _____ ☐ Non-Denominational ☐ Other Religion:_____

Hebrew Name *(if known)* : _____

JEWISH EDUCATION: Bar/Bat Mitzvah: ☐Yes ☐No Confirmation: ☐Yes ☐No Read Hebrew?: ☐Yes ☐No

YAHRZEIT REMINDERS : Please remind me of these dates by: ☐ English Calendar ☐ Hebrew Calendar

	Full Name	Relationship	Date of Death
1.			
2.			
3.			
4.			
5.			
6.			

Are there accommodation needs for a family member?: _____

List skills or interests you would like to share with WRT: _____

Previous Congregational Affliation (within the last 5 years): _____

Comments:

To the Board of Trustees of Westchester Reform Temple: I hereby apply for membership in Westchester Reform Temple and agree to abide by its by-laws.

Signature:_____ Date:_____