

Congregation Beth Hatikvah

בית התקווה

1410 11th Street, Bremerton, WA 98337
(360) 373-9884

Mailing: PO Box 2522, Bremerton, WA 98310
www.beth-hatikvah.org

Membership Pledge Statement for 2014-2015/5775

Please return by September 10, 2014

SECTION A:

Name (Adult #1): _____ Name (Adult #2): _____
E-Mail: _____ E-Mail: _____
Address: _____
City: _____ State/Zip code: _____ Telephone: _____

SECTION B:

I will pay my pledge:

- Annually Due: October 1, 2014
 Semi-annually Due: 10/1/14; 4/1/15
 Quarterly Due: 10/1/14; 1/1/15; 4/1/15; 6/15/15
 Monthly Due: 1st of each month

Please remember:
No reminders will be sent.

- Yes No Would you like the ability to have your pledge automatically deducted from your bank account? (If yes, you will be contacted for *easy set-up*.)

SECTION C:

Membership Category: (Please give according to your ability.)

- | | |
|---|---|
| <input type="checkbox"/> SHOMRIM (Guardians) \$2,400 | <input type="checkbox"/> Family \$720 |
| <input type="checkbox"/> BONIM (Builders) \$1,800 | <input type="checkbox"/> Individual \$430 |
| <input type="checkbox"/> TOMCHIM (Supporters) \$1,200 | <input type="checkbox"/> Other \$_____ |

For financial hardship concerning dues, please contact membership@beth-hatikvah.org, or call the membership chair at (360) 373-9884

SECTION D:

If you would like to contribute towards the purchase of a Congregational set of *Mishkan Hanefesh*, the new High Holy Days *Machzor*, please include \$36 per copy.

Bookplates will be available for your donation.

- One Book (\$36) Three Books (\$108) Other \$_____
 Two Books (\$72) Four Books (\$144)

SECTION E:

TOTAL PLEDGE \$_____

(See reverse side)

SECTION F:

Please select the way(s) you would like to participate in our community:

- Building Maintenance/Repair/Beautification
- Membership Outreach/Development
- Religious Education
- Ritual/Holidays
- Special Events/Fundraising
- OTHER _____

SECTION G:

No Changes to information

Information to Update:

Adults _____ Birthday _____
 _____ Birthday _____

Children _____ Birthday _____
 _____ Birthday _____
 _____ Birthday _____
 _____ Birthday _____

Wedding Anniversary _____

Yahrzeits:

Name (English & Hebrew)	Member's Name	Relationship to member	Secular Date; Jewish Calendar (if known)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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For further information or questions, please contact us at (360) 373-9884
www.beth-hatikvah.org or Membership@beth-hatikvah.org