

2025 Membership Application

Membership Start Date:	/ /

ADULT #1	
Name:	Birth Date://
Pronouns: He/Him/His She/Her/	Hers □ They/Them/Their □ Other
Marital Status: ☐ Single ☐ Married/Do	omestic Partnership □ Widowed □ Divorced □ Separated
Jewish (see note below): \square Yes \square No	☐ In conversion process Hebrew Name:
Read/Write Hebrew: □ Yes □ No	Read Torah/ Haftarah: □ Yes □ No
Mobile Phone #: ()	Email:
Occupation:	Business Name:
ADULT #2	Birth Date: / /
	Thers □ They/Them/Their □ Other
Marital Status : □ Single □ Married/Do	omestic Partnership □ Widowed □ Divorced □ Separated
Jewish (see note below): \square Yes \square No	☐ In conversion process Hebrew Name:
Read/Write Hebrew: □ Yes □ No	Read Torah/ Haftarah: □ Yes □ No
Mobile Phone #: ()	Email:
Occupation:	Business Name:
'ANNIVERSARY	

Note: We welcome non-Jewish partners and encourage them to participate in the life of our community. If you have questions or concerns in this area, feel free to contact the Rabbi at extension 226. We also offer a provisional membership for those in conversion process.



// CHILDREN

	Name	Hebrew Name	Date of Birth	Grade	School
1					
2					
3					
4					

CONTACT INFORMATION				
Name on mailing label:				
Address:				
City:	State:	Zip:		
Main Contact Phone # — Please select one:				
☐ Adult #1's mobile phone.				
☐ Adult #2's mobile phone				
☐ Other: ()				
FINDING WEST END SYNAGOGUE				
THE STATE OF THE S				
How did you hear about West End Synagogue?				
If introduced by a member, please inform member's name:				
Why did you choose West End Synagogue?				
PRIVACY				
// COMMUNITY LIST				
Names, address, phone numbers and children's names/ages will be included in our community list (visible to members only). If you'd like to change your privacy options, please send an e-mail to admin@westendsynagogue.org .				

// CONSENT FOR IMAGE USE

The undersigned hereby give permission for pictures/video recordings/identification of any family members to be used in advertisements, websites, news coverage or publicity.



YAHRZEIT INFORMATION If you would like to be reminded of the anniversary of the death of a loved one. Date of Died before or after sundown?* Name Related to? Relationship Death * Note: The time of death (before or after sundown) is needed to determine the date of death on the Jewish calendar. **INTERESTS** Sing/Play a musical instrument: \square Yes \square No • Other relevant skills, abilities or interests: INTEREST IN CONTRIBUTING WITH COMMITTEES / PROGRAMMING **Select all below that apply:** (Please indicate which person is interested in each selection) The chairperson of each selected initiative will reach out to you. ☐ Adult Education □ Music \square Garden ☐ Bible, Text Study \square Hebrew, Beginners \square Retreat ☐ Bikkur Cholim ☐ Hebrew Conversation ☐ Ritual (helping members in time of illness) \square Israel Connections (service leading, levning, etc.) ☐ Book Club □ JFLL \square Social Action [Jewish Family Life & Learning] ☐ Communications/Publicity ☐ Torah Study ☐ Family Programming ☐ Kiddush \square Volunteer in the office □ Membership \square Wise Aging Initiative □ Fundraising Other _



FINANCIAL OBLIGATIONS OF MEMBERS

All members commit to the following financial obligations:

1. Fair Share Dues

Fair Share affirms our community's values of accessibility to WES membership, social justice and individual responsibility to the community.

As part of our obligation to create a kehillah kedoshah – a holy community – we each assume responsibility for meeting the costs of maintaining and operating our synagogue. Our Fair Share Dues system allocates a portion of that financial responsibility among our community's members based on their household income. Most of the remaining funds needed are supplied through voluntary contributions.

For the assessment of your Fair Share dues, you are not asked to disclose details concerning your income, nor are any financial documents required. Rather, we ask only that each member of the community report and accept the dues justly applicable to them by pledging their Fair Share dues level as honestly and as accurately as possible. All financial information is treated confidentially.

On the next pages you will find a 'New Member Pledge Form' for your membership dues. Unless communicated otherwise, a member's pledge will be automatically renewed every year.

Membership includes High Holy Days tickets for adult members and their children under age 22.

All members in good standing will receive their High Holy Days tickets. All financial obligations to the synagogue must be paid in full at the latest by the time High Holy Days tickets are mailed.

Note: The synagogue's fiscal year is 1/1 - 12/31.

2. Building Fund

Members are expected to contribute at least \$200 per year, starting in the third year of membership until a total of \$1,000 has been paid to the building fund.

West End Synagogue believes that an inability to pay should never be a barrier to membership or education. Special consideration will be given to circumstances that prevent you from meeting any part of your financial commitment. If accommodations are needed, please contact the synagogue administrator (admin@westendsynagogue.org / 212-579-0777, ext. 220) or treasurer (treasurer@westendsynagogue.org) to discuss in confidence dues assessment or payment arrangement.

REMOTE MEMBERSHIP POLICY

West End Synagogue has also enacted its membership policy for individuals and families who access our programming **digitally only**. Please note that this is not for existing members or prospective members who are within the New York City area who can access our services and programs both in person and digitally.

"Remote Members" is a category that encompasses our former "Out of Town" membership designation and combines these members with newer members who have gotten to know West End Synagogue through Zoom. Aside from Shabbat and Holiday services, we provide access to most of our various events and seminars and allow our Remote Members to serve on committees, as well as in a Governance role (as a Board Member) should they so desire and be nominated.

For Remote Members we suggest as an annual fee a donation in the range of \$984-\$1,236, typically charged in monthly installments (\$82-\$103/month) on a credit card.



NEW MEMBER SPECIAL DUES (not applicable to Remote Members)

FIRST YEAR (2025)	SECOND YEAR (2026)	THIRD YEAR ONWARDS (2027+)
 Welcome, new member! For this year, you only pay: \$750 if you join between Jan 1—Jun 30; \$500 if you join between Jul 1—High Holy Days; 	You pay only 50% of your fair share dues , according to the categories in the table below (but not less than categories S2/F2).	You pay 100% of your fair share dues , according to the categories in the table below.
• FREE (donation expected) if you join between High Holy Days—Dec 31.		

Membership includes High Holy Days tickets for adult members and their children under age 22.

FAIR SHARE DUES SCHEDULE (January 1, 2025 – December 31, 2025)

Please identify your dues category in one of the tables below, for your pledge form.

INDIVIDUAL				
Annual Income	Category	Annual Dues		
Under \$30,000	S2	\$600		
\$30,000 - 39,999	S3	\$854		
\$40,000 - 49,999	S4	\$1,110		
\$50,000 - 59,999	S ₅	\$1,446		
\$60,000 - 69,999	S6	\$1,610		
\$70,000 - 79,999	S7	\$1,928		
\$80,000 - 89,999	S8	\$2,256		
\$90,000 - 99,999	S9	\$2,380		
\$100,000 - 124,999	S10	\$2,766		
\$125,000 - 149,999	S12	\$3,276		
\$150,000 - \$174,999	S14	\$3,968		
\$175,000 - \$199,000	S16	\$4,222		
\$200,000 - \$249,999	S20	\$4,600		
\$250,000 - \$349,999	S24	\$5,056		
\$350,000 - \$500,000	S25	\$5,306		
Over \$500,000	S26	\$5,620		
Students	S11	\$500		
Remote Membership	S13	\$82-\$103 monthly*		

*Or \$984-\$1,236	lump sum
-------------------	----------

FAMILY				
Annual Income	Category	Annual Dues		
Under \$30,000	F2	\$850		
\$30,000 - 39,999	F3	\$1,110		
\$40,000 - 49,999	F4	\$1,360		
\$50,000 - 59,999	F5	\$1,616		
\$60,000 - 69,999	F6	\$1,880		
\$70,000 - 79,999	F7	\$2,142		
\$80,000 - 89,999	F8	\$2,358		
\$90,000 - 99,999	F9	\$2,698		
\$100,000 - 124,999	F10	\$3,214		
\$125,000 - 149,999	F12	\$3,684		
\$150,000 - \$174,999	F14	\$4,488		
\$175,000 - \$199,000	F16	\$4,876		
\$200,000 - \$249,999	F20	\$5,272		
\$250,000 - \$349,999	F24	\$5,646		
\$350,000 - \$500,000	F25	\$5,826		
Over \$500,000	F26	\$6,100		
Students	F11	\$726		
Remote Membership	F13	\$82-\$103 monthly*		

*Or \$984-\$1,236 lump sum



NEW MEMBER PLEDGE FORM

I/We realize that as a member of the West End Synagogue community I/we am/are committing to be a part of a kehillah kedoshah, a sacred community. In acceptance of that responsibility, I/we hereby pledge my/our Fair Share Membership Dues which I/we have fully assessed.

I am/We are in the following fair share dues category (e.g. S14, F25):	
I/We pledge that my/our special dues amount for 2025 is: \$	(special first year)
I/We pledge that my/our special dues amount for 2026 is: \$	(50% of regular dues, min S2/F2)
I/We pledge that my/our dues amount for 2027 onwards is: \$	(regular dues)
☐ I/We understand that the "Fair Share Dues Schedule" for 2026 onwards may be subject to I/We understand that, in addition to their dues, members are expected to contribute a total at the minimum rate of \$200/year, beginning in the third year of membership. ☐ I/We understand that my/our pledge will be automatically renewed every year unless I/We understand that if I/we resign my/our membership, my/our pledge won't be pro-rated.	tal of \$1,000 to the Building Fund
Operating Fund: Members are asked to contribute voluntarily an additional 10% of their dues to the Operating Fu	nd to sustain the congregation.
I/We pledge additional: \square 10% of my/our dues or \square Another amount: \$ one-time or \square yearly	
Payment for 2025: New members are required to pay for their special dues when submitting their 2025 membership required to provide a credit card number.	o application. Remote members are
Amount paid by check or to be charged to my credit card at this time: \$	
\square My/Our check is enclosed. \square I/We am paying by credit card (provide information bel	ow).
Payment for 2026 onwards: Invoices will be issued in December and are due January 31 the following year. Please select one:	
☐ I/We will mail a check by January 31.	
☐ Please bill my/our credit card below every January 31.	
☐ Please bill my/our credit card below in equal monthly instalments, starting Januar	y 31.
Credit Card Information: □ Visa □ Mastercard □ American Express	
Credit Card number: Exp. Date: Securi	ty Code:
Name (exactly as it appears on the credit card):	
Billing address:	
\square Please maintain this credit card below on file at West End Synagogue for payment toward	l events, fees, dues, etc.
Signature: Date:	
Signature: Date:	