

Membership Fee Structure 2020-21

Please consider a •Sustaining Membership to financially strengthen our community and allowing us to provide additional programs.

Membership Type	*Sustaining Member	Regular Member
Young Adult (Ages 18-30) Membership (Paid in Full)	\$130	\$105
1st Time, 1st Year Membership (per Adult) Dues (PAID IN FULL) by Credit Card on PayPal	\$510 \$520 or *\$87 mo.	\$460 \$470 or *\$78 mo.
Individual - Annual Dues Dues (PAID IN FULL by Credit Card on PayPal)	\$1,220 \$1,250 or *\$210 mo	\$840 \$855 or *\$160 mo.
Single Parent - Annual Dues Dues (PAID IN FULL by Credit Card on PayPal)	\$1,120 \$1,140 or *190 mo	\$720 \$735 or *125 mo.
Couple/Family - Annual Dues Dues (PAID IN FULL by Credit Card on PayPal)	\$1,530 \$1,620 or *\$270 mo.	\$1,275 \$1,300 or *\$217 mo.

*Amount each Post-dated Check or Credit Card Payment Processed by Executive Director (6 payments maximum before 6/30/21).

NOTE: If paying by CREDIT CARD or POST-DATED CHECKS (regular monthly installments or PAID IN FULL via PayPal), please note that the increase in membership dues shown above is necessary to cover administrative and processing costs/fees.

SUMMARY OF PAYMENT OPTIONS AND OTHER INFORMATION:

- (1) Check - Paid in Full (*Payable to B'nai Or of Boston. Mail to: P.O. Box 400715, Cambridge, MA 02140*)
- (2) Post-dated Checks over Time (MAX.# is 6 checks. LAST POST DATE: June 30, 2021).
(Make *Post-dated Checks payable to B'nai Or of Boston AND mail to P.O. Box 400715, Cambridge, MA 02140*)
- (3) Credit Card via PayPal (PAID IN FULL) on B'nai Or website: www.bnaior.org/membership.html
- (4) Credit Card, IN FULL or MONTHLY PAYMENTS (must be processed by Executive Director, MAX# of Monthly Payments is SIX (6) processed on or before June 30, 2021). See Membership Registration, Payment Options, Page 2.
- (5) Subtract \$75 per household if you belong to another congregation (Membership Registration, Payment Summary, Page 2).
- (6) Subtract \$36 per household if you pay ALEPH dues directly to ALEPH (Membership Registration, Payment Summary, Page 2).

Special arrangements for financial assistance and/or work study can be arranged by contacting ??? at ??? on or before September 1, 2020. All conversations will be held in confidence.

B'NAI OR CONTACT INFORMATION

Email: admin_bnai_or@hotmail.com

Mailing Address: P.O. Box 400715, Cambridge, MA 02140

NO EMAIL? Call our B'nai Or Executive Director, Teresa Lessin, at 781-258-7276 and leave a message.



Pages 1 and 2 should be completed and returned. Please Print Clearly.

[] RETURNING MEMBER -- Please fill in your name, applicable membership contribution and any information you would like to change in the B'nai Or Members Directory. Otherwise, information in Directory will be the same as last year.

Membership Type (from Membership Fee Structure page) _____ *Amount Due \$* _____

[] NEW MEMBER -- Complete entire form.

Membership Type (from Membership Fee Structure page) _____ *Amount Due \$* _____

ADULTS IN HOUSEHOLD (Name(s) as you would like them to appear in the Membership Directory):

Name _____ DOB MM/DD _____

*Tel 1 _____ Cell _____ Email _____

Name _____ DOB MM/DD _____

*Tel 1 _____ Cell _____ Email _____

*Only note phone #'s you want listed in B'nai Or Members Directory. Indicate 'H' (home) or 'C' (cell).

CHILDREN IN FAMILY

(Name(s) and Age(s) will be listed in the B'nai Or Directory. Please print clearly.

School Grade 2020-21

Name(s)

Age

If a college student,
note College/University

REQUIRED: MAILING ADDRESS (B'nai Or Members Directory. Please print clearly):

Street _____ Apt. # _____

City _____ State _____ Zip _____

CONTACT INFORMATION

Email: admin_bnai_or@hotmail.com ~ Mailing Address: P.O. Box 400715, Cambridge, MA 02140
NO EMAIL? Call our B'nai Or Executive Director at 781-258-7276 and leave a message.

Please check ALL of the boxes that apply to you. PLEASE PRINT LEGIBLY.

In addition to Membership dues, we ask you to consider contributing to any of B'nai Or's **DONATION** categories listed below that speak to you. All donations are tax-deductible. We appreciate you and are grateful for your support.

(<input type="checkbox"/>) General Fund (donations to be used wherever needed)	\$ _____
(<input type="checkbox"/>) Rabbi's Yad Ezra/Helping Hand Fund (Rabbi's discretion to help people in need)	\$ _____
(<input type="checkbox"/>) Machzor Fund (Print new copies of Machzor as needed)	\$ _____
(<input type="checkbox"/>) Mark Goldstein Musician's Fund (honorarium for guest musicians at Shabbat Services and Other Events)	\$ _____
(<input type="checkbox"/>) Esther's Kids (children's programs; subsidize families who attend retreat)	\$ _____
(<input type="checkbox"/>) Kiddush & Oneg Fund (for challot, wine, food, and paper goods)	\$ _____
(<input type="checkbox"/>) Tzedakah Fund (donations to a variety of charitable organizations)	\$ _____
(<input type="checkbox"/>) Torah Fund (repair Torah as needed)	\$ _____
(<input type="checkbox"/>) Love and Enlightenment Scholarship Fund in Honor of Rabbi Hanna Tiferet and Rabbi Daniel Siegel (to assist members with attending classes and workshops with a focus on heart, mind, and spirit)	\$ _____

TOTAL DONATION CONTRIBUTIONS (please note this amount on the appropriate line below): \$ _____

PAYMENT OPTIONS (PLEASE PRINT LEGIBLY):

Please consider paying by check so that we do not incur additional credit card processing fees. Thank you.

() CHECK in FULL made payable to: B'nai Or of Boston

() CHECKS POST-DATED: _____ # of checks (MAXIMUM is SIX). LAST POST-DATE IS JUNE 30, 2021.

() CREDIT CARD IN FULL via WEBSITE: www.bnaior.org/membership.html.

() CREDIT CARD IN FULL processed by Executive Director. Please complete credit card information below.

NOTE: Minimum amount of credit card charge is \$18.

() CREDIT CARD INSTALLMENTS (MAXIMUM # is SIX, amount per payment schedule or other arrangements. Minimum amount (each payment) which will be processed is \$18).

I authorize the B'nai Or Executive Director to charge the credit card noted below a total amount of \$ _____ to cover my Annual Membership Dues. This amount should be charged in # _____ monthly payment of \$ _____ beginning the 15th day of _____ (month). I understand that all DONATIONS will be added to my first month's installment. LAST CREDIT CARD CHARGE DATE IS JUNE 25, 2021. Please note address and phone number associated with card if different than information provided on Page 1.

CREDIT CARD INFORMATION (information will be kept secure and confidential). PLEASE PRINT LEGIBLY.

Name as it appears on Card _____ Phone # _____

Address (Street, Apt. #, City, State, Zip) _____

() MasterCard () VISA CARD # _____ Exp. _____ CID/SSID# _____

PAYMENT SUMMARY:

Annual Membership Dues (from Membership Registration Page 1)	\$ _____
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Total Donations from Above	\$ _____
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Break-the-Fast Dinner Registration (enclose completed Break-the-Fast Dinner form and payment in applicable amount. Please pay by separate CHECK if possible.)	\$ _____
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Sub-Total	\$ _____
Less \$75 (if member of another shul)	-\$ _____
Less \$36 (if pay ALEPH dues directly to ALEPH)	-\$ _____
TOTAL PAYMENT	\$ _____

Please return completed Membership Registration form by September 1, 2020 to
B'nai Or of Boston, PO Box 400715, Cambridge MA 02140

We will not be able to accept mailed in Registration forms postmarked after September 1.

After that date, please register at the door during the High Holy Days.

If possible, please bring COMPLETED FORMS with you. For more information, visit www.bnaior.org.