

**Pledge Form - 2019 to 2020 (5780)**  
**Tree of Life Congregation**  
**(Due July 1, 2019)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Fair Share Dues**

The Tree of Life Congregation is a member of the Union for Reform Judaism and has adopted URJ's Fair Share System for recommending annual pledges for membership dues.

<u>Family income from all sources</u>	<u>Membership Dues</u>
Below \$75,000 .....	1.50 % of income..... [ \$350 - \$1,125]
\$ 75,001 to \$100,000.....	1.75 % of income..... [\$1,313 - \$1,750]
\$100,001 to \$150,000.....	2.00 % of income..... [\$2,000 - \$3,000]
\$150,001 and above .....	2.50 % of income..... [\$3,750 - ]
Full time student .....	\$50
Shatil (ages 20-30) .....	\$100

**Total Pledge \$ \_\_\_\_\_**

Please complete the lines that apply:

\_\_\_\_\_ I. Enclosed is the full payment for 2019-2020

**OR**

I (we) request the following payment plan:

\_\_\_\_\_ II. Semiannual (due September 1 and March 1) payments equal to half of total pledge:

\_\_\_\_\_ III. Quarterly (due September 1, December 1, March 1 and June 1)) payments equal to 1/4 of total pledge:

\_\_\_\_\_ IV. Monthly (due 1st of each month beginning in September) payments equal to 1/12 of total pledge

**Ticket Request: Please send me \_\_\_\_\_ High Holidays tickets (max. 6 per family)**

**Volunteer Support**

Tree of Life is a volunteer organization. In addition to financial support, we also need your time and expertise. If you are willing and able to contribute your time to Tree of Life, please consider volunteering for one or more activities:

Ritual Committee \_\_\_\_\_

Education Committee \_\_\_\_\_

Membership Committee \_\_\_\_\_

House Committee \_\_\_\_\_

Kitchen Coordinator \_\_\_\_\_

Care Committee \_\_\_\_\_

Hosting an Oneg \_\_\_\_\_

Social Action \_\_\_\_\_

Comments: \_\_\_\_\_

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### Other Contributions

#### Yahrzeits

Name \_\_\_\_\_ Date of Death \_\_\_\_\_ Contribution \$ \_\_\_\_\_

Name \_\_\_\_\_ Date of Death \_\_\_\_\_ Contribution \$ \_\_\_\_\_

Name \_\_\_\_\_ Date of Death \_\_\_\_\_ Contribution \$ \_\_\_\_\_

Name \_\_\_\_\_ Date of Death \_\_\_\_\_ Contribution \$ \_\_\_\_\_

**Total Yahrzeits** \$ \_\_\_\_\_

#### Honors and Other Gifts

Many wish to give additional gifts for specific purposes or to honor special persons or events. Please list the name or event and amount of contribution below.

In Honor of \_\_\_\_\_, please accept my Contribution of \$ \_\_\_\_\_ to the \_\_\_\_\_ Fund

In Honor of \_\_\_\_\_, please accept my Contribution of \$ \_\_\_\_\_ to the \_\_\_\_\_ Fund

In Honor of \_\_\_\_\_, please accept my Contribution of \$ \_\_\_\_\_ to the \_\_\_\_\_ Fund

**Funds:** Building, Cantorial, Leadership, Library, Holocaust Education, Prayer Books, Rabbi Discretionary, Religious School, Social Service, and General.

**Total Honors & Other Gifts** \$ \_\_\_\_\_

**Total Other Contributions** \$ \_\_\_\_\_

**Fair Share Dues Pledge 2019-2020 Payment (from page 1)** \$ \_\_\_\_\_

**Other Contributions (from page 2)** \$ \_\_\_\_\_

**Total Payment** \$ \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please make checks payable to:** Tree of Life Congregation  
Attention: Treasurer  
PO Box 791  
Morgantown, WV 26507-0791

If you have any questions you may contact Linda Herbst, Treasurer, 304-599-6947 or [treasurer@etzhaim.org](mailto:treasurer@etzhaim.org)