

HAR SHALOM 2021/2022 NEWMEMBER

FAMILY INFORMATION AND MEMBERSHIP COMMITMENT

Please use the 2012/2022 RENEWAL form if you have already completed this information.



Dear Friends,

We are delighted you would like to formally join Har Shalom. We welcome everyone who wishes to be part of our warm and vibrant community. Har Shalom is committed to making sure no one is unable to be part of our community for financial reasons. If you are facing financial challenges, we will work with you to make alternate financial arrangements most appropriate for your family.

To discuss your membership contribution or any other questions about joining Har Shalom, please contact:

Jennifer Blumberg, Administrative Director
847-814-7456 • Jennifer@har-shalom.com

Family/Household Last Name: _____ Home Phone _____

Street Address _____ City _____ State _____ Zip _____

SPOUSE/PARTNER/HEAD OF HOUSEHOLD 1
Full Name _____
Mobile Phone _____
Work/Other Phone _____
Email _____

SPOUSE/PARTNER/HEAD OF HOUSEHOLD 2
Full Name _____
Mobile Phone _____
Work/Other Phone _____
Email _____

PLEASE COMPLETE OTHER SIDE OF FORM WITH FAMILY INFORMATION.

HAR SHALOM MEMBERSHIP CONTRIBUTION OPTIONS FOR 2021/2022

PLEASE SELECT YOUR TAX DEDUCTIBLE MEMBERSHIP CONTRIBUTION:

Please complete separate school registration form for students attending religious/Hebrew school and/or requesting Bar/Bat Mitzvah date.

_____ Double Chai - \$3,600 INCLUDES: • High Holy Days Tickets* • Rabbi to officiate at life-cycle events (baby naming, wedding, funeral) • Additional generous support for Har Shalom programs	_____ Level 1 - \$2,000 INCLUDES: • High Holy Days Tickets* • Rabbi to officiate at life-cycle events (baby naming, wedding, funeral)	NEW THIS YEAR _____ Level 2 - \$1,000 INCLUDES: • High Holy Days Tickets* • Price reduction for Rabbi to officiate at life-cycle events (baby naming, wedding, funeral)**
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*Details about High Holy Days plans will follow. If services are in person, **tickets will be limited to Har Shalom members first.** If services are held virtually, there will be a package price, per family, for non-members to receive electronic access to all services.

**Pricing for rabbi to officiate at life-cycle events (included with Level 1 Membership) ~

	Non-Members:	Level 2 Members:
Wedding	\$1400	\$1200
Baby Naming	\$400	\$300
Funeral	\$700	\$600

HAR SHALOM COVID SAFETY VACCINE REQUIREMENT:

Har Shalom requires all eligible people to be fully vaccinated to attend in person services and programs. Please confirm vaccination status and note date all household members were fully vaccinated. I/we received the second dose of the Pfizer/Moderna vaccine or received the J&J vaccine on the following date(s): _____

Additional Donation to Har Shalom: \$ _____

TOTAL AMOUNT ENCLOSED: \$ _____

Donations to Har Shalom, including membership contributions, are tax deductible to the extent allowed by law.

If you have questions or need assistance, please contact Jennifer Blumberg: Jennifer@har-shalom.com or 847-814-7456

Please print out this form and send it along with payment to: Har Shalom • 1954 First Street - #367 • Highland Park, IL 60035

MINOR CHILDREN

YOU MUST ALSO COMPLETE SCHOOL REGISTRATION FORMS TO ENROLL STUDENTS IN HAR SHALOM RELIGIOUS/HEBREW SCHOOL.

Full Name _____	Gender <input type="checkbox"/> m <input type="checkbox"/> f
Age _____ Public/Day School Grade _____	Needs Bar/Bat Mitzvah Date <input type="checkbox"/> yes <input type="checkbox"/> no
Full Name _____	Gender <input type="checkbox"/> m <input type="checkbox"/> f
Age _____ Public/Day School Grade _____	Needs Bar/Bat Mitzvah Date <input type="checkbox"/> yes <input type="checkbox"/> no
Full Name _____	Gender <input type="checkbox"/> m <input type="checkbox"/> f
Age _____ Public/Day School Grade _____	Needs Bar/Bat Mitzvah Date <input type="checkbox"/> yes <input type="checkbox"/> no
Full Name _____	Gender <input type="checkbox"/> m <input type="checkbox"/> f
Age _____ Public/Day School Grade _____	Needs Bar/Bat Mitzvah Date <input type="checkbox"/> yes <input type="checkbox"/> no

ADULT CHILDREN

Full Name _____	Full Name _____
Gender <input type="checkbox"/> m <input type="checkbox"/> f Age _____	Gender <input type="checkbox"/> m <input type="checkbox"/> f Age _____
Full Name _____	Full Name _____
Gender <input type="checkbox"/> m <input type="checkbox"/> f Age _____	Gender <input type="checkbox"/> m <input type="checkbox"/> f Age _____

YAHRTZEIT REMEMBRANCES

We are verifying our records. Please complete this section even if you have submitted previously or your family was affiliated with B'nai Torah.

Full Name _____	Full Name _____
Relationship _____ Date of Death _____	Relationship _____ Date of Death _____
Full Name _____	Full Name _____
Relationship _____ Date of Death _____	Relationship _____ Date of Death _____

ACCOMMODATIONS

Har Shalom is committed to being an all inclusive, welcoming community. If anyone in your family requires any accommodations, including religious school and bar/bat mitzvah students, please use this space to let us know your needs, or contact Rabbi Sommer to discuss privately.