

# HAR-SHALOM 2025/2026 NEW MEMBER

## FAMILY INFORMATION AND MEMBERSHIP COMMITMENT

Please use the 2024/2025 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, Executive Director**  
**847-814-7456 • [Jennifer@har-shalom.com](mailto: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 2025/2026

### PLEASE SELECT YOUR TAX-DEDUCTIBLE MEMBERSHIP CONTRIBUTION:

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

\_\_\_\_ Bronze Level - \$1,200

\_\_\_\_ Silver Level - \$2,400

\_\_\_\_ Gold Level - \$3,600

\_\_\_\_ Platinum Level - \$5,000

\_\_\_\_ Ruby Level - \$7,200

\_\_\_\_ Diamond Level - \$10,000

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](mailto:Jennifer@har-shalom.com) or 847-814-7456**

**Please print out this form and send it along with payment to:**  
Har Shalom • 2070 Green Bay Road - #367 • Highland Park, IL 60035

Payment may also be made at our website: [har-shalom.com/donate](https://www.har-shalom.com/donate) (you will be taken to PayPal and can use a credit card)  
or contact Jennifer Blumberg - [jennifer@har-shalom.com](mailto:jennifer@har-shalom.com) or 847-814-7456 - if you would like to use Zelle or Venmo.

MINOR CHILDREN	
<b>YOU MUST ALSO COMPLETE SCHOOL REGISTRATION FORMS TO ENROLL STUDENTS IN HAR SHALOM RELIGIOUS/HEBREW SCHOOL.</b>	
Full Name _____	<input type="checkbox"/> <input type="checkbox"/>
Age _____ Public/Day School Grade _____	Needs Bar/Bat/Bet Mitzvah Date <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name _____	<input type="checkbox"/> <input type="checkbox"/>
Age _____ Public/Day School Grade _____	Needs Bar/Bat/Bet Mitzvah Date <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name _____	<input type="checkbox"/> <input type="checkbox"/>
Age _____ Public/Day School Grade _____	Needs Bar/Bat/Bet Mitzvah Date <input type="checkbox"/> Yes <input type="checkbox"/> No
Full Name _____	<input type="checkbox"/> <input type="checkbox"/>
Age _____ Public/Day School Grade _____	Needs Bar/Bat/Bet Mitzvah Date <input type="checkbox"/> Yes <input type="checkbox"/> No

ADULT CHILDREN	
Full Name _____ <div style="display: flex; justify-content: space-between; margin-top: 10px;"><span><input type="checkbox"/> <input type="checkbox"/></span><span>Age _____</span></div>	Full Name _____ <div style="display: flex; justify-content: space-between; margin-top: 10px;"><span><input type="checkbox"/> <input type="checkbox"/></span><span>Age _____</span></div>
Full Name _____ <div style="display: flex; justify-content: space-between; margin-top: 10px;"><span><input type="checkbox"/> <input type="checkbox"/></span><span>Age _____</span></div>	Full Name _____ <div style="display: flex; justify-content: space-between; margin-top: 10px;"><span><input type="checkbox"/> <input type="checkbox"/></span><span>Age _____</span></div>

YAHRTZEIT REMEMBRANCES	
Full Name _____ Relationship _____ Date of Death _____	Full Name _____ Relationship _____ Date of Death _____
Full Name _____ Relationship _____ Date of Death _____	Full Name _____ Relationship _____ Date of Death _____

ACCOMMODATIONS
<p>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/Bet Mitzvah students, please use this space to let us know your needs or contact Rabbi Sommer to discuss privately.</p>