



Beth David Reform Congregation

1130 Vaughan Lane ▪ Gladwyne, Pennsylvania 19035-1394 ▪ 610-896-7485

Dear Friend,

We're glad that you are interested to learn about our Beth David congregation and possibly becoming a part of our family in the future. We are a diverse community of people who come from traditional and non-traditional backgrounds, including interfaith, interracial, and LGBTQ, and anyone who wants to discover and build spiritual connections.

It has been always very important to us to remain an intimate, caring and vibrant community, which can give our members support, wonderful learning opportunities and the feeling of being a part of our community.

We will be happy to meet you and answer your questions about all the different aspects of our congregational life, including our wonderful Religious School, our services, our members, and our professional staff.

L'shalom,

Ray Reed, President
rreed@bdavid.org

Rabbi Beth Kalisch
bkalisch@bdavid.org



A rich synagogue life awaits.

Belonging to a small synagogue means feeling like you are a part of the community. To get the most from your Beth David experience, we request that all new members get to know our community in the following three ways:

1. **Make an appointment with our rabbi:** Rabbi Beth Kalisch is someone with whom you can sit down and talk! She wants to get to know all of her congregants personally, and answer any questions or concerns you might have. Call the office to make an appointment.
2. **Celebrate Community Shabbat with us: Learn...Pray...Nosh...** Several Community Shabbatot convene throughout the year on Saturday mornings where our students attend school on Saturday rather than Sunday. In lieu of Torah Study, Rabbi Kalisch or another learned scholar conducts a learning experience for our adults, and then we all assemble to pray and eat together as one community. The schedule is: 9:30am Religious School for students and Life Long Learning for adults; 10:30am Community Shabbat Service, 12:30pm Shabbat Luncheon.
3. **Attend an orientation:** Dive into Jewish life! Choose a topic that interests you the most from a list to be provided (or attend them all!) to study with our rabbi or cantor and learn more about related activities at Beth David. Specific dates and topics for these and other sessions will be posted on our website.
4. **Meet Other New Members at Shabbat Dinner:** Plan to join us for dinner and services in your honor on Friday evening October 27th. A Tot Shabbat program for young children and their families will take place at 6:00 pm, followed by dinner at 6:30 pm and Shabbat services at 7:30 pm

We also encourage you to take full advantage of your new Beth David membership by **Getting Involved**. Join one of our auxiliaries - Beth David Men (BDM) or Women of Reform Judaism (WRJ). Help us “repair the world” with our many Social Action endeavors. Exercise your mind with adult learning opportunities. Participate in the varied family activities offered by our Religious School. Come together to worship, celebrate, schmooze, and have a good time.

We look forward to having you as part of our Jewish community.

For questions, comments, or further discussion, please contact our Membership Co-Chairs:
Barry Siegel bsiegel@bdavid.org or Rodd Bender, rbender@bdavid.org

To make an appointment with Rabbi Kalisch please call the office at 610-896-7485, x100

We know synagogue life is a commitment.
 We think Beth David is worth it.
 We'd like to make it easier for you to get to know our community.

Beth David is pleased to offer new members a significant discount on the annual membership financial commitment for the first two years, beginning June 1, 2017 through May 31, 2019. New members are asked to pay a minimum of 25 percent of the commitment applicable to their membership category in their first year, and a minimum of 75 percent of the applicable commitment in their second year. Membership categories and corresponding commitment amounts for the 2017-2018 membership year are as follows:

Membership Category	Subsidized Commitment ¹	First Year 25% Minimum	Second Year 75% Minimum
Family (couple or family over age 35)	\$3,050	\$762.50	\$2,287.50
Single (over age 35)	\$1,950	\$487.50	\$1,462.50
Senior Couple (over age 65)	\$1,900	\$475.00	\$1,425.00
Senior Single (over age 65)	\$1,200	\$300.00	\$ 900.00
Young Family (single/couple/family age 30-35)	\$ 825	\$206.00	\$ 619.00
Young Adult (single/couple/family under age 30 - not child of current member)	\$ 325	\$ 81.25	\$ 243.75

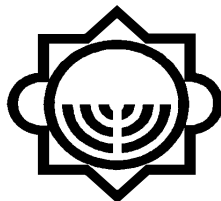
¹Subsidized commitment amounts are subject to possible increase from year to year, usually only by a moderate amount. Accordingly the discounted amounts shown above may be slightly different for the 2018-2019 membership year.

Additional Discount for New Families with Young Religious-School-Age Children

Beth David will waive the first-year membership commitment entirely for new families whose eldest child is entering grades K, 1 or 2 if that child enrolls in Religious School (subject to \$950 Subsidized annual school fee for grades 1 and 2, no fee for K). These families will be asked to pay the minimum 75% of the applicable membership commitment in the second year, as outlined above.

We hope these discounts will help you consider if our community is right for you. While we are not asking for a full financial commitment, we do ask that you commit yourself in getting to know us. To learn more, please call the Beth David office (610-896-7485), or contact our Membership Chairs Rodd Bender (rbender@bdavid.org) or Barry Siegel (bsiegel@bdavid.org). We look forward to showing you all that Beth David has to offer!

Note: In respect for our neighbors, these discounts only apply if you have not been a member of another local synagogue in the last 12 months.



Beth David Reform Congregation

1130 Vaughan Lane ~ Gladwyne, Pennsylvania ~ 19035

Phone: 610.896.7485 ~ Fax: 610.642.5406

Email Address: office@bdavid.org ~ Web Address: www.bdavid.org

MEMBERSHIP APPLICATION

Applicant #1 _____

Applicant #2 _____

Marital Status (circle one): Single Married Divorced Widowed Partnership

Date of Marriage, if applicable ____/____/____ Maiden Name: _____

Home Address _____

Home Phone _____

Applicant #1: Date of Birth ____/____/____

Hebrew Name _____ ben/bat _____

Religious Affiliation (if other than Jewish) _____

E-mail Address _____ Cell Phone _____

Employer _____

Business Address _____

Applicant #2: Date of Birth ____/____/____

Hebrew Name _____ ben/bat _____

Religious Affiliation (if other than Jewish) _____

E-mail Address _____ Cell Phone _____

Employer _____

Business Address _____

It is the policy of Beth David to consider family units as two adults living in a marriage, civil union, or committed relationship, with or without children in the household, and without regard to individual religious beliefs of each spouse or partner.

*Child's Name	Gender	Date of Birth	School Grade as of Sept.	Secular School
_____	(M-F)	___/___/___	_____	_____
Bar/Bat Mitzvah Date (or expect to)		Confirmation Date (or expect to)		
_____		_____		

*Child's Name	Gender	Date of Birth	School Grade as of Sept.	Secular School
_____	(M-F)	___/___/___	_____	_____
Bar/Bat Mitzvah Date (or expect to)		Confirmation Date (or expect to)		
_____		_____		

*Child's Name	Gender	Date of Birth	School Grade as of Sept.	Secular School
_____	(M-F)	___/___/___	_____	_____
Bar/Bat Mitzvah Date (or expect to)		Confirmation Date (or expect to)		
_____		_____		

[If more room is needed, please use the back page]

Relatives or Friends in the Congregation

Name _____	Relationship _____
Name _____	Relationship _____
Name _____	Relationship _____
Name _____	Relationship _____

Yahrzeit Information

Observer	Name of Deceased	Relationship	English Date	Hebrew Date
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

[If more room is needed, please use the back page]

Do you wish to be notified by the Hebrew or English date of death? _____

In an attempt to understand your interests and expectations of Beth David Reform Congregation, please take a few minutes to fill out the following questionnaire. Thank you.

Applicant's Name _____

Co-Applicant's Name _____

- How did you hear about Beth David Reform Congregation? _____

- Prior Synagogue Affiliation _____

- Dates of Affiliation _____
- I give Beth David Reform Congregation permission to obtain my membership records from my previous synagogue (please sign)

- Are there any special needs, or remarks you would like to share with Beth David Reform Congregation?

I hereby apply for membership in Beth David Reform Congregation. As a member, I agree to remain a member in good standing by paying the Annual Commitment, Building Fund, Religious School fees (if applicable), and any other assessments as fixed by the Board of Trustees. I agree to abide by the bylaws of Beth David Reform Congregation. Synagogue membership entitles me and my family to all the rights and privileges reserved for membership, including admission to all High Holy Days services.

Date _____ Signature _____
Date _____ Signature _____

Please note, at least 25% of dues and 100% of Religious School fees must be paid in order to receive High Holy Day tickets. The entire balance is due by the end of each calendar year.

So that we may better serve you, please indicate your areas of interest within Beth David:

- | | | |
|--|--|--|
| <input type="checkbox"/> ADULT EDUCATION | <input type="checkbox"/> YOUTH EDUCATION | <input type="checkbox"/> WORSHIP AND RITUAL |
| <input type="checkbox"/> SOCIAL ACTION | <input type="checkbox"/> ISRAEL | <input type="checkbox"/> FUNDRAISING |
| <input type="checkbox"/> FRIEND-RAISING | <input type="checkbox"/> INTERFAITH FAMILIES | <input type="checkbox"/> LEADERSHIP DEVELOPMENT |
| <input type="checkbox"/> TORAH STUDY | <input type="checkbox"/> BETH DAVID MEN | <input type="checkbox"/> WOMEN OF REFORM JUDAISM |

Please use the space below for any additional information.

Thank you for your interest in Beth David Reform Congregation. We look forward to celebrating with you and your family.



Beth David Reform Congregation • 1130 Vaughan Lane • Gladwyne, PA 19035
610-896-7485 www.bdavid.org

Inspiring a community of seekers, learners, and doers to pursue the best in ourselves and the repair of the world (tikkun olam תיקון עולם).



Beth David Reform Congregation

Annual Commitment and Fees 2017/2018

*First year new members pay 25% of the Subsidized level**

<u>Annual Commitment</u>	<u>Subsidized</u>	<u>*25%</u>	<u>Basic</u>	<u>Sustaining</u>
Family	\$3,050	\$762.50	\$4,200	\$7,200
<i>Couple or Family over age 35</i>				
Single	\$1,950	\$487.50	\$3,100	\$7,200
<i>Single over age 35</i>				
Senior Couple	\$1,900	\$475	\$4,200	\$7,200
<i>Over age 65</i>				
Senior Single	\$1,200	\$300	\$3,100	\$7,200
<i>Over age 65</i>				
Young Family*	\$ 825	\$206.25	N/A	
<i>Single/Couple/Family age 30 through 35</i>				
Young Adult*	\$ 325	\$ 81.25	N/A	
<i>Single/Couple/Family under age 30 not son or daughter of current member</i>				

Building Fund **\$3,600**

Payable over 6 years/first year deferred.

**Not applicable to Young Family or Young Adult categories.*

<u>Religious School Fees</u>	<u>Subsidized</u>	<u>Unsubsidized</u>
Grades K	\$ - 0 -	\$1,450
Grades 1 - 2	\$ 950	\$1,450
Grades 3 - 6	\$1,170	\$1,750
Grades 7 - 10	\$ 985	\$1,450
Grades 11 -12	\$ 475	\$ 755
Bar/Bat Mitzvah Fee	\$1,500	(\$500 deposit/\$1,000 balance)
Confirmation Fee	\$ 500	

The fund for BETH DAVID

Your level of support is greatly appreciated.

Tree of Life

Small Leaf	\$ 540
Medium Leaf	\$ 900
Large Leaf	\$1,800
Stone	\$3,600

Memorial Plaques **\$ 500**



BETH DAVID REFORM CONGREGATION FINANCIAL OBLIGATIONS POLICY

Beth David Reform Congregation believes that membership should be a pleasurable and rewarding experience without creating a financial hardship for any member. The fiscal policy of Beth David is meant to spread the financial responsibility of operating, (facility and programs), over the entire congregation. The goal is to balance the financial needs of our synagogue and the ability of our members to pay.

Annual Commitment: Based on membership category.

Annual Fees: Religious School tuition and fees are per child.

Building Fund: Beth David depends upon a Building Fund program in order to maintain and improve our physical plant. Each family/congregational unit is required to pay the Building Fund (except Young Family and Young Adult levels) and will be billed on the anniversary of your join date.

Payment Timetable: High Holy Day tickets will not be issued without the payment of at least 25% of the Annual Dues Commitment, payable upon receipt of the initial June billing each year. The remaining balance is due in full no later than December 31 of the same year, unless Special Financial Arrangements have been previously made. Annual Religious School fees are due in full prior to the opening of school. Bar/Bat Mitzvah Deposits will be billed when dates are assigned. Dates will not be held without receipt of the deposit. The balance of the Bar/Bat Mitzvah Fee must be paid in full prior to the date of the Bar/Bat Mitzvah.

Special Financial Arrangements: Beth David welcomes new members regardless of their particular financial circumstances. Members who believe their situation deserves special consideration are encouraged to contact the Executive Director and request a confidential Special Financial Arrangements application. All matters will be held in strict confidence. Please note that only synagogue dues are subject to consideration; all other fees and building funds are payable in full.

Voluntary Contributions: Beth David prides itself in running its programs and physical plant in as efficient a manner as possible. However, the annual commitment generally covers only about 80 percent of our operating expenses, as is the case with most religious institutions. For this reason we offer a "Basic" Commitment rate for each membership category (except Young Adults and Young Families), which is based on the costs Beth David incurs to operate the synagogue. If you are financially able, we ask that you consider paying at the Basic Commitment level. Additionally, there is a third level, "Sustaining," which offers you the opportunity to make an even larger, tax deductible contribution to Beth David. If you are able to pay more than the Subsidized rate but less than the Basic or Sustaining rates, feel free to pay at a level in-between. We are depending on each other to make this system work in reducing additional fundraising efforts each year to a minimum.

A significant percentage of our school children's education is subsidized by the congregation. If you have a child(ren) in our Religious School and are in a financial position to do so, please consider paying all or a portion of the Unsubsidized level. However, paying the Subsidized amount is all that is required.

The fund for BETH DAVID combines and expands our annual unrestricted giving initiatives with a more formal framework for longer-term giving in order to strengthen our financial foundation. At present, the **fund for BETH DAVID** will accept unrestricted voluntary donations, and we hope you consider making a generous gift or pledge.

Beth David Reform Congregation

Credit Card Authorization Form 2017-2018

Your credit card(s) will only be used for the purpose intended and will be charged for the specified amount you authorize below. This form will act as a permanent signature on file for any future credit card transactions from June 1, 2017 through May 31, 2018, unless otherwise noted.

Without this signed authorization form your credit card cannot be charged.

Please note, a minimum of 25% of your Annual Commitment must be paid by **September 1, 2017**, in order to receive High Holy Day tickets, with the remainder payable in full by December 31, 2017. All school fees must be paid by the first day of school, **September 10, 2017**.

Select a payment plan:

Pay in Full: Charge total payment of my Annual Commitment and all fees (including Building Fund if applicable.)

Charge 25% of my Annual Commitment and 100% Religious School fees (if applicable), in the following manner:

June \$_____ July \$_____ August \$_____

Then charge the remainder of my Annual Commitment and fees in 4 equal monthly transactions on the first of every month starting September 1, 2017 with the last payment on December 1, 2017.

Charge my credit card this **one time** only for the specified amount. \$_____ (With this option your card will be charged once and NOT kept on record.)

Other: _____

Include an additional payment of \$_____ as my Voluntary Contribution to **The fund for Beth David** as selected above.

All information provided will be kept confidential and is securely protected by Beth David Reform Congregation. By signing this form you have agreed to the terms as stated herein.

I, _____, hereby authorize Beth David Reform Congregation to charge my credit card as stated above or when given permission by me, the cardholder, or an authorized signer.

Mastercard _____ Visa _____

Credit Card# _____ Exp. Date ____/____/____

Name (as it appears on card): _____
(First) (M) (Last)

Cardholder's Signature: _____ Date: ____/____/____

I authorize Beth David Reform Congregation to charge the credit card(s) indicated in this authorization form according to the terms outlined above. I understand that this authorization will remain in effect until the designated expiration date or until I cancel it in writing, whichever comes first, and I agree to notify Beth David Reform Congregation in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. If the above noted payment dates fall on a weekend or holiday, I understand that the payments may be executed on the next business day. I certify that I am an authorized user of this credit card and that I will not dispute the payments with my credit card company provided the transactions correspond to the terms indicated in this form.

Beth David Reform Congregation 2017-2018
Religious School Registration

Returning: ____

New: ____

Student Information

Name:

Birthdate:

Secular School:

Grade as of 9/2017:

Parent One Information

Name:

Address:

Email:

Home #

Work #

Cell #

Medical and Allergy Information

Allergies: _____

Medications: _____

Special Needs: _____

I would like to share special information regarding placement and any other specific information that will help my child in his/her school experience:

Parent Two Information

Name:

Address:

Email:

Home #

Work #

Cell #

Younger siblings not yet in Religious School:

Name & Birthdate :

I enroll my child in Grade _____ for **September 2017**. I have enclosed a **non-refundable** deposit of **\$275.00, payable to Beth David Reform Congregation**. I understand that the balance of tuition must be paid by **the first day of school** for my child to attend.

Signature

Date

Emergency Contact

Name: _____

Phone: _____

OFFICE USE ONLY:

DEPOSIT RECEIVED: _____

NOTES:



Beth David Religious School

1130 Vaughan Lane ~ Gladwyne, Pennsylvania ~ 19035 ~ Phone: 610-896-7485

PLEASE COMPLETE THIS FORM AND RETURN WITH YOUR REGISTRATION

General Permission and General Medical Release Form 2017-2018

Name of Student: _____

Grade: _____

I give my child permission to attend any field trips during the 2017-18 school year.

I understand that I will receive notice of each trip but this form serves as a permission form to leave the Beth David Campus for the year.

This form also authorizes the school authorities to take whatever measures they consider necessary in obtaining medical and other assistance in case of emergencies occurring during school operations and/or and field trips.

I give permission for photographs of my student to be published on the website of Beth David Reform Congregation. I understand that these photos can be viewed by anyone in the world, *but no identifying information will be displayed.*

Parent Signature and Date

Home Phone Number

Cell Phone Number

Work Number

Emergency Contact Name (in the event the parent cannot be reached)

Emergency Contact Name Phone Number

Beth David Religious School
1130 Vaughan Lane
Gladwyne, PA 19035
610-896-7485

Beth David Men*

* we are mensch!

Membership Form – June 2017 to May 2018

Name: _____

Address: _____

Home Phone: _____ Business Phone: _____














Cell Phone: _____ E-Mail Address: _____

Occupation _____ Employer _____

Please make your \$36.00 membership check payable to Beth David Men and mail to:

Beth David Men
c/o Robert Friedman
1130 Vaughan Lane
Gladwyne, PA 19035

Please let us know where we can count on your participation for the following events:

- | | |
|---|---|
| _____  Softball Team | _____  Build the sukkah |
| _____  Annual Dinners | _____  Supporting Youth Events |
| _____  Sporting events/theater | _____  Gladwyne Jewish Cemetery clean-up |
| _____  Guest speakers | _____  Famous Spaghetti Dinner |
| _____  Ushers | |
| _____  Event planning and events | |
| _____  Wine tasting, scotch & cigar, brewery tour, and other social events | |
| _____  Developing new events and programs for Beth David Men | |
| _____  Recruiting new members for Beth David Men | |

If you have any suggestions for other programs or events you would like to be involved in or a program of interest that is not mentioned above, please identify them and any other comments or suggestions you have for Beth David Men in the space provided below:

Need more information? Have questions? Contact us:

Co-President – **Jim Castello**

Phone: **610-667-8344**

Email: jcastello1101@gmail.com

Co-President – **Joe Fontak**

Phone: **610-668-1328**

Email: jfontak@gmail.com



Be a Part of Beth David Men*

*we are mensch!

Beth David Men is focused on enhancing the Beth David experience through social events, athletics, congregational service and community service -- and having a good time in the process!!

We are a member-driven group, and our goal is to involve you in the Beth David community. We succeed because you not only participate at our events, but also in planning and running events, including:

- ★ **softball team**
- ★ **building the congregational sukkah**
- ★ **wine tasting, scotch & cigar, brewery tour, and other social events**
- ★ **prime sporting events and theater tickets**
- ★ **annual dinners**
- ★ **Mitzvah Day - historic Gladwyne Jewish Cemetery clean-up**
- ★ **featured speakers and presentations**
- ★ **more being planned!!**

Just \$36 annual dues

Join Us Now! Be a part of Beth David Men!

Contact us:

Co-President – **Jim Castello**
Co-President – **Joe Fontak**

Phone: **610-667-8344**
Phone: **610-668-1328**

Email: jcastello1101@gmail.com
Email: jfontak@gmail.com

WRJ Membership for 2017-2018

Your \$50 commitment supports a wide range of activities including special events and financial contributions that benefit Beth David, the World Union for Progressive Judaism, and Jewish children and women in need worldwide.

_____ New Beth David Congregant?
One year of WRJ membership is complimentary for new congregants (joined after 1/2017).
Please fill out and return this form.



Don't forget to fill out the SURVEY on the back.

Name: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Beth David congregant? ___yes ___no

Your \$50 membership fee is payable to:
Beth David Women of Reform Judaism (WRJ)

Mail your checks to:
Debby Weinstein
1637 Oakwood Drive, S-118,
Penn Valley, PA 19072



Beth David Women of Reform Judaism 2017-2018 Officers

President

Barbara Katzman
(610) 658-9548 bak1942@gmail.com

Executive Vice President

Susan Frant
(484) 412-8875 sfrantedd@gmail.com

Vice President

Cheryl Petersohn
(610) 527-3593 cheryl.petersoh@gmail.com

Treasurer

Roberta Ruvin
(610) 664-8510 reruvin@gmail.com

Financial Secretary

Debby Weinstein
610-649-3920 debswein@comcast.net

Recording Secretary Board rotation

Corresponding Secretary

Shelly Partlow
(484) 270-8243 prof.partlow@gmail.com

Board Members-at-large

Arlene Bobb
(610) 308-3939 arlene@arlenebobb.com

Carole Dichter
(610) 664-2833 crdnutrition@comcast.net

Carol Shiffrin
(610) 664-8387 crshiffrin@verizon.net

Beth David Reform Congregation



WOMEN OF REFORM JUDAISM 2017-2018 MEMBERSHIP

Without you we are
one woman short!



Why should I join Beth David's WRJ/Sisterhood?

WRJ is a group of dynamic women of all generations who work together to create opportunities for education, enrichment, personal growth, and FUN!

- **Social action:** We have become more active in social action, primarily on women's rights and fighting hunger through creative programming and events
- **Sisterhood events** include Bingo/Mah Jongg Night, Women's Seder, and Sisterhood Shabbat
- **Cultural activities** include *Broadway Bound*, museum visits, local theater, dynamic speakers, and book groups.
- **Support for the Beth David Community** by raising funds for our Religious School, B'nai Mitzvot and Confirmands.
- **Jewish Holiday Celebrations** include the sale of honey for the high holy days, Purim baskets for congregants, a Hanukkah gift sale, and festive Shabbat schmoozes.



**WRJ WORKS TO
CREATE LASTING CONNECTIONS
AMONG AND BETWEEN WOMEN
OF EACH GENERATION.**

**MANY EXCITING ACTIVITIES ARE
BEING PLANNED FOR THE
UPCOMING YEAR AND WRJ
WANTS YOU TO BE PART OF IT!**

**BETH DAVID'S
WOMEN OF REFORM JUDAISM
WELCOMES YOU
TO JOIN US FOR THE**

Get Involved in WRJ

Indicate your interest in the following WRJ activities. Would you be interested in helping to organize an activity or event?

That's for me	Activity/ Event	I am able to help
___	Book Groups	___
___	Broadway Bound	___
___	Local trips: museums, tours, theater	___
___	Social action activities	___
___	Caring Community	___
___	Web site/social media	___
___	Bingo/ Mah Jongg Fundraiser	___
___	Women's Seder	___
___	Sisterhood Shabbat	___
___	Gifted at Beth David	___
___	Fund Raising Activities (honey sales, Purim baskets)	___
___	Speakers	___
___	WRJ Board	___
___	Program planning	___

Additional suggestions or comments concerning WRJ activities or events:
