

Congregation B'nai Israel

3600 Riverside Blvd. Sacramento, CA 95818 Phone: 916-446-4861 Fax 916-446-2875

Financial Pledge (July, 2018- June, 2019)

Adult Applicant 1	
Email and phone #	
Adult Applicant 2	
Email and phone #	

You must submit a pledge form to receive High Holy Day tickets or enroll in Religious School.
No one will be denied membership based on their inability to make the suggested pledge.

The **suggested** pledge levels are shown below. We hope you can commit to one of these levels, but please select "other" and fill in your pledge amount if that is not possible. We value everyone's membership commitment and your generosity helps insure the future of Congregation B'nai Israel.

Membership pledge levels			
Nasim (Leaders)	\$8,000	Family Membership	\$2,820
Giborim (Heroes)	\$7,000	Single Membership	\$1,980
Malachim (Angels)	\$6,000	Senior Family (limited income)	\$1,530
T'zadikim (Righteous ones)	\$5,000	Senior Single (limited income)	\$1,200
Shomrim (Guardians)	\$4,000	Associate	\$500
Bonim (Builders)	\$3,300	Other	

My membership pledge:	\$
<i>Optional affiliate memberships:</i>	
Arza: (Association of Reform Zionists of America) Promotes liberal Judaism in Israel and around the world	\$50
Brotherhood of CBI	\$42
Women of B'nai Israel (choose level)	\$43 ____ \$72 ____ \$54 ____ \$108 ____
Total:	
Signature:	Date:

Payment		
Electronic Funds Transfer Authorization for July 1, 2018 - June 30, 2019		
Based on the total calculated, I authorize Congregation B'nai Israel to transfer the total on the preceding page by EFT:	<input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly, on the _____ day of the month (or the next business day)	
Signature:		Date:
Member Name:		
Please attach a voided check		
VISA or Mastercard Authorization for July 1, 2018 - June 30, 2019:		
Based on the total calculated, I authorize Congregation B'nai Israel to transfer the total on the preceding page by credit card:	<input type="checkbox"/> Annually <input type="checkbox"/> Biannually <input type="checkbox"/> Quarterly <input type="checkbox"/> Monthly, on the _____ day of the month (or the next business day)	
Signature:		Date:
Name on card:		
Card number:	3 digit security code:	Expiration:
CBI must pay a 3% fee on each credit card transaction. To enable CBI to benefit from the full amount of my gift, I will contribute an additional 3% to each authorized payment.		<input type="checkbox"/> Yes <input type="checkbox"/> No Initial here: _____ Date: _____
Statements: I wish to receive my monthly statement: (Statements are also available when you log into cbisacramento.org/members/my-billing.php)		<input type="checkbox"/> By Mail <input type="checkbox"/> By Email
On-line payments are also available. See cbisacramento.org for details		

Payment

The L'dor V'dor program is comprised of congregants who have included CBI in their estate planning to help provide a stable foundation for the future of our community. If you would like information about this planned giving program, please check "yes." A member of our planned giving team will contact you.

Yes, Please tell me more about L'dor V'dor.