



CONGREGATION NER TAMID OF SOUTH BAY

Dear Members Requesting Financial Assistance,

Congregation Ner Tamid is committed to enabling everyone to be members of CNT regardless of financial condition. This year, we will be changing the procedures for financial assistance with membership dues and CLAL tuition and fees for several reasons:

- The synagogue is projected to run a deficit in excess of \$100,000 for the fiscal year 2018-19.
- Those paying full membership dues will pay 5% more in 2019-20, and CLAL tuition will increase by about 7%. See enclosed schedule of dues and fees.
- The CNT staff and leadership have been spending too much time trying to collect membership dues and CLAL fees. As a result, they have not had enough time to devote to other core matters, including programs and financial management.

Consequently, we will be instituting two changes this year for everyone requesting financial assistance with membership dues or CLAL tuition and fees:

- Everyone requesting assistance must fill out the application on the following pages **by July 1, 2019**. Applications like this are standard at nearly all Conservative and Reform synagogues.
- Everyone requesting assistance must commit to an automatic payment plan. An automatic payment plan is a schedule of payments automatically charged to a credit card, a schedule of payments automatically withdrawn from a bank account, postdated checks, or payment in full. **An automatic payment plan must be in place by August 15, 2019.** If an automatic payment plan is not in place by August 15, High Holiday tickets will not be issued, and children will not be allowed to attend CLAL. Starting in 2020, all members, including those paying in full, will also be required to commit to an automatic payment plan.

These changes have been extensively discussed by the CNT Board and were announced at the Annual Meeting on May 6, 2019.

We recognize that the application requests sensitive financial information, and we are committed to keeping it confidential. The application will be seen initially only by CNT's Executive Director, Kate Flanagan. She will remove the names and other identifying information from the application before passing it to the committee that will be in charge of determining the amount of financial assistance. That committee will be composed of two members of CNT's Executive Committee. They will NOT know the identities of the people applying for assistance. They will either accept the amount you propose to pay

in membership dues and CLAL tuition and fees, or they will propose another amount. If they accept the amount you propose or if you accept the amount they propose, your name will remain anonymous. If you want to further discuss the membership dues and CLAL tuition and fees you pay, it may be necessary to reveal your identity to one or both members of the committee. No one other than Kate Flanagan and the two members of the committee will ever have access to your financial information.

In order for the committee to examine the applications carefully, and in order to leave time for discussion, it is essential that the process start very soon. That is why we are asking for your application by **July 1, 2019**.

Thank you very much.


Sincerely,



Allan Ephraim
CNT President, 2018-19



Warren Sterling
CNT Executive Vice President, 2018-19
CNT President, 2019-20



Adam Feingold
CNT Financial Secretary, 2019-20



Kate Flanagan
CNT Executive Director

Membership FY 2019/2020

	Security Fee	General Dues	Building Maintenance	Total Contribution
Family	\$150	\$3,408	\$427	\$3,985
Individual	\$150	\$2,249	\$427	\$2,826
Senior Family	\$150	\$2,264	\$282	\$2,696
Senior Individual	\$150	\$1,243	\$144	\$1,537
613-1	\$150	\$538	\$75	\$763
613-2	\$150	\$1,076	\$150	\$1,376
613-3	\$150	\$1,614	\$225	\$1,989

CLAL & USY High	Early Bird Tuition	Regular Tuition	Late Tuition	Materials Fee
Torah Tots	\$650	\$700	\$750	\$0
K-1	\$750	\$800	\$850	\$150
2	\$965	\$1,015	\$1,065	\$150
3-7	\$1,260	\$1,310	\$1,360	\$150
8-10	\$750	\$800	\$850	\$150
Madrichim (gr 8-11)	\$225	\$275	\$325	\$0
Madrichim (gr 12)	\$125	\$175	\$225	\$0

Registration Deadlines

- Early Bird: Registration Completed & Materials Fee Paid by July 15
- Regular: Registration Complete & Materials Fee Paid July 16 – August 15
- Late: Registration Completed & Materials Fee Paid August 16 onward

Sibling Discount: \$150 per additional child (applies to siblings in grades 3-7 only)

New Student Emergency Fee: \$25 per student

All financial assistance agreements must be finalized before attempting to access the online CLAL registration system.

Application for Financial Assistance 2019
Due July 1, 2019

Adult #1 First and last name: _____

Adult #2 First and last name: _____

Adult #1 Cell Phone: _____ Adult #2 Cell Phone: _____

Grades children will be attending in CLAL for 2019-2020: _____

Annual income: \$_____. This should be the number you submitted to the IRS as your Adjusted Gross Income (AGI) on your 2018 Form 1040 line 37, Form 1040A line 21, or Form 1040EZ line 4.

Please list your three largest expenses, following the example below

Expense	Amount	How often paid
Rent _____	\$2500 _____	per month _____ (example)
_____	_____	per _____
_____	_____	per _____
_____	_____	per _____

How much do you think it would be fair for you to pay in membership dues: \$_____

How much do you think it would be fair for you to pay for CLAL fees: \$_____

If there are any extenuating circumstances or anything else you would like to share with the committee about your income, your expenses, and what would be reasonable for you to pay for membership dues and CLAL fees this year, please do so below.

Please indicate the automatic payment method you plan to use to pay your dues and CLAL fees:

Visa Master Card. Credit Card Number _____

Expiration Date _____ CVV _____ (3 digits on back)

Name on credit card _____

EFT/ACH. Bank Name _____

Name(s) on account: _____

Bank Routing Number _____

Account Number _____

Postdated checks delivered to CNT office before August 15, 2019

Pay in full by August 15, 2019

Note that nothing will be charged to your credit card or withdrawn from your bank account until the amounts and a payment schedule has been agreed upon.

Please indicate how often you would make payments:

Pay in full by August 15, 2019

Pay in equal monthly installment on the 15th day of the month starting in August 2019.

To the best of my knowledge, the statements in this application are true and correct. If I have selected Visa, Master Card, or EFT/ACH as my automatic payment plan, and if CNT accepts the amount or amounts I listed on the prior page, I agree that CNT may charge my credit card or withdraw money from my account in accordance with the information provided above.

Adult Applicant #1: _____ Date: _____

Adult Applicant #2: _____ Date: _____

Please return this form to the Executive Director, Kate Flanagan by **July 1, 2019**. We will be in touch with you to discuss the amount of assistance available to you. Our primary goal is to work with you to ensure you remain a member of Congregation Ner Tamid.