

NAHALAT SHALOM 5783 MEMBERSHIP FORM 2022-2023

3606 Rio Grande Blvd. NW ABQ NM 87107 Phone / Text 505-343-8227 office@nahalatshalom.org www.nahalatshalom.org

Membership Forms can be completed online and electronically submitted at: www.nahalatshalom.org

□ New Member OR □ Returning Member) (Please complete this form even if you are a Returning Member)

Adult 1 − Include in Membership Directory? □Yes □No			Adult 2 — Include in Membership Directory? □Yes □No						
Name	Name			Name					
Address			Address						
Phone			Phone						
Email			Email						
Occupation and Skills (list even if retired)			Occupation and Skills (list even if retired)						
Retired	□Yes □No		Retired?	□Yes	□No				
Children									
Name		Age	Name		Age				
Name		Age	Name		Age				
COMMITTEES	S & VOLUNTEER	OPPORTUNITIES (Please	indicate Adul	lt 1 or A	dult 2)				
A donation of yo	our time is sorely ne	•	Please volunteer	for a com	mittee, a leadership role on the Va'ad				
☐ Mishpocha	a: Support people in	times of need	☐ Comr	munity Act	tion Committee: liaison between Nahalat				
☐ Tikkun Olam: Help with donations to multiple			Shalo	Shalom and other community organizations					
organizati	ons and social servic	e projects	☐ Libra	Library: learn about Judaism as you sort books					
Art: Music, dance, visual arts, storytelling, gallery (circle			☐ Kitch	Kitchen: Keep our kitchen and pantry in order.					
which activities interest you)			☐ Even	Event Help: Set up/take down tables and chairs.					
☐ Adult Educ	cation: organize Adu	It Ed Programs	Greeters and parking help.						
■ Membersh	hip: Communicate w	ith prospective members	□ Facili	cilities: construction, maintenance, landscaping					
■ Abq Interf	gious communities		chnology Team: Support hybrid services as well as						
	n social and econom	=			website, graphic/flyer design				
■ NM Interfa	erfaith Power and Light: Climate justice								

MEMBERSHIP PLEDGE GUIDELINES

Your pledges are the basis of our annual operating budget. Our budget includes salaries for office staff, rabbinic staff when they perform life (and death) rituals, our cantor, our Religious School Director and teachers, building upkeep and repairs, technology needed for hybrid services, and the list goes on. We ask for a pledge of \$100 a month to help us meet our financial needs. We never turn anyone away from our congregation because of money. Please give what you can. We appreciate you consideration when making your membership donation.

5783 PLEDGE INFORMATION September 2022 - August 2023

Name				_ Date	!		
Annual Pledge Amount \$							
One Time Payment of \$							
☐ Personal Check Enclosed	☐ Credit Ca	ard: Pay online	at <u>www.nahalatsh</u>	alom.or	g		
\square I will mail a one-time check	or make a one-ti	me online payr	nent to Nahalat S	halom			
Multiple Payments of \$	_ Monthly	☐ Quarterly	☐ Biannually	☐ Oth	er		
☐ Personal check enclosed for	partial payment	🗆 Credit	Card: Pay online	www.na	halatshalom.org		
☐ Recurring auto payments from	om my bank (Co	ontact <u>office@r</u>	ahalatshalom.org	for acco	ount info.)		
Making recurring payments thr your payments because it invol		_	check is currently	y the bes	st method for us	to receive	
☐ I would like to make an additional donation o membership in and support of Albuquerque Inte						classes,	
Please write separate checks for membership, chede Please send completed registration form to: Na Please complete registration form even if you are	halat Shalom, 3	606 Rio Grande	Blvd. NW, Albuq	-		and online.	
THE NAHALAT SHALOM SPIRITUAL LEAD	ERSHIP END	OWMENT					
I intend to include Nahalat Shalom in my	will/estate plan						
I have already included Nahalat Shalom i	n my legacy plar	nning. Please le	t me know how to	formali	ze my intention.		
I intend to donate to Nahalat Shalom late	this year						
I would like more information in order to	decide						
YAHRZEIT INFORMATION	if no changes fr	om previous fo	rms.				
Name	Relatio	nship	Secular Date of	Death	Before sundown	After sundow	
EMERGENCY CONTACT INFORMATION							
Name Relation:	Ph	Phone					
POWER OF ATTORNEY INFORMATION							
Name Relation:		Pł	ione				
DO WE HAVE YOUR PERMISSION TO CONTACT YOUR E	MERGENCY CONT	TACT AND/OR YO	UR POA IF WE CANI	NOT REAC	CH YOU? YES	□ NO	
ARE YOU INTERESTED IN GETTING MORE INFORMATION A	ΔΒΟΙΙΤ ΝΔΗΔΙ ΔΤ ς	HAI OM'S SECTION	J OF LA PLIFRTA NIAT	IIRAI RIID	IAI GROHNDS I V	FS TINO	