Kol HaEmek Annual Support and Information Form

Please return with payment to: Kol HaEmek, Box 416, Redwood Valley, CA 95470

Name	and	
Address		
City/State		Zip
Child	Birth Date	
Child	Birth Date	
Phone(s)	E-mail	

The above information will also be used for updating our community directory that goes out in January. If you do not wish to be in the directory, please check here. \Box

□ I am interested in Sunday school for my child/children. Please send me an application.

I would like to help with the following activities:

- \Box Jewish educational programs
- □ Community lunch program for the hungry- our tzedakah (charity) project.
- □ Special projects: holiday/shabbat gathering, newsletter or_
- □ Hosting a gathering or holiday in my home or at the Shul.

Annual Support (1 st three leve	els include High Holidays, Newsletter, Rabbi Services)	
□ \$ 990 + Patron	□ \$ 200 - 225 Individual	
□ \$ 450 - 500 Family	\square \$ 36 Newsletter (Shema) \square Other \$	
Extra Funds Support		
	Rabbi Discretionary Fund \$	
	□ Homeless/Hungry Program \$	
$\Box \text{ Matching $5000 Gift } \Box \text{ Otherwise}$		
High Holiday Services		
Yes, I/We will attend High Holid	day Services for:	
🗆 Rosh Hashanah	-	
	ll support for 57 \Box Adult(s) @ \$200 \Box Child(ren) @ \$60	
Payment Method		
\Box I have included a check or cre	edit card authorization for full payment.	
Circle card type: Visa or		
□ Charge my credit card: Quart	terly: \$ Monthly: \$	
Name on Card:	Phone:	
Mailing Address of Card:		
Amount of charge: \$	ddress of Card: Charge: Scharge: Today's Date:	
Card #:	Expiration:	
Signature of Card Holder:	3 digit # on back	

Thank you for your support!

Please print your names for the **Yiskor** Memorial List and **Yahrzeit** List (include Yahrzeit date):