



# MEMBERSHIP APPLICATION

2026-2027



**TEMPLE KOL AMI**

It's Where We **Do Jewish**

15030 N. 64th Street Scottsdale, AZ 85254

☎ (480) 951-9660 [🌐 templekolami.org](https://www.templekolami.org)



## IT'S WHERE WE DO **HOLIDAYS**

- High Holy Days
- Chanukah
- Purim Carnival & Shpiel
- Sukkot Under the Stars
- 2nd Night Passover Seder
- Shabbat Service  
Every Friday at 7:00 PM
- Monthly Tot Shabbat  
Service at 5:30 PM
- Monthly Café Kol Ami Dinner  
on Shabbat at 6:00 PM



## IT'S WHERE WE DO **SOCIAL ACTION**

- Blood Drives
- Thanksgiving Turkey Train
- Annual Food Drive
- Israel Advocacy
- Refugee Support
- Clothing & Toy Drives
- Little Pink Houses of Hope
- Summer Water Drives

## IT'S WHERE WE DO **EDUCATION**

- |   |  |   |
|---|--|---|
| <p><b>Families</b></p> <ul style="list-style-type: none"> <li>Annual Family Retreat</li> <li>Tikkun Olam Opportunities</li> <li>Holiday Celebrations</li> </ul> <p><b>Preschool</b></p> <ul style="list-style-type: none"> <li>Early Childhood Center (Infant - Pre-K)</li> <li>Early Childhood Center Camp Programs</li> </ul> | <p><b>School-Aged</b></p> <ul style="list-style-type: none"> <li>Religious School (K - 6th Grade)</li> <li>eBrew (Online Hebrew Training)</li> <li>B'nai Mitzvah Training</li> <li>Teen Learning &amp; Leadership</li> <li>Youth Choir (2nd - 6th Grade)</li> <li>Teen Travel</li> </ul> | <p><b>Adults</b></p> <ul style="list-style-type: none"> <li>Schmooze with the Rabbi</li> <li>Jewniversity</li> <li>Intro to Judaism</li> <li>eBrew (Online Hebrew Training)</li> <li>Jewish Baby University</li> <li>Adult Bar/Bat Mitzvah</li> <li>Special Events</li> </ul> |
|---|--|---|



## IT'S WHERE WE DO **COMMUNITY**

- Bless the Pets
- Social Activities & Book Club for Adults 60+
- Business Connect
- Dads Group & Moms Group
- Israel Independence Day
- Yizkor & Yom Hashoah
- Interfaith Programming & Dialogue
- Under the Red Tent
- Women's Group
- Rosh Chodesh learning with Cantor Noa
- Fundraising Events
- Splash Pad Events
- Weekly meeting of Schmooze with the Rabbi
- Weekly Torah Study with the Rabbi

**TEMPLE KOL AMI****MEMBERSHIP APPLICATION 2026-2027**

Please complete this application so we can better serve you and your family. We are pleased to have you join our Temple Kol Ami community and look forward to "Doing Jewish" with you!

**ADULT #1**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Nickname \_\_\_\_\_

DOB \_\_\_/\_\_\_/\_\_\_ Sex:  Male  Female Hebrew Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Community Gate Code: \_\_\_\_\_

Phone #s: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Full Time  Part Time  Retired: Former Occupation \_\_\_\_\_

**ADULT #2**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Nickname \_\_\_\_\_

DOB \_\_\_/\_\_\_/\_\_\_ Sex:  Male  Female Hebrew Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Community Gate Code: \_\_\_\_\_

Phone #s: Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_

Email \_\_\_\_\_ Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Full Time  Part Time  Retired: Former Occupation \_\_\_\_\_

Marital Status  S  M  W  D Wedding Anniversary (month / day / year) \_\_\_/\_\_\_/\_\_\_

What brought you to Temple Kol Ami? \_\_\_\_\_

Previous synagogue affiliation? \_\_\_\_\_

Please provide us any other information that will help us to serve the needs of your family:

---



---



---

**GET INVOLVED & MAKE NEW FRIENDS: BECOME A VOLUNTEER!**

We need you! Your skills are always welcome. Please indicate your areas of interest.

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Caring Committee | <input type="checkbox"/> Golf                       | <input type="checkbox"/> Youth & Education |
| <input type="checkbox"/> Fundraising      | <input type="checkbox"/> Marketing & Communications | <input type="checkbox"/> Social Action     |
| <input type="checkbox"/> Special Events   | <input type="checkbox"/> Age 60+ Programs           | <input type="checkbox"/> Women's Programs  |
| <input type="checkbox"/> Finance          | <input type="checkbox"/> Membership                 | <input type="checkbox"/> Other: _____      |



## CHILDREN

Please check the "RS" box if your child will be attending Religious School and indicate their grade as of August 2025. If your child is attending Religious School, please complete the health forms at [templekolami.org/health/](http://templekolami.org/health/)

Child's Name \_\_\_\_\_ M\_\_\_\_/F\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  RS

Weekday School \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ M\_\_\_\_/F\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  RS

Weekday School \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ M\_\_\_\_/F\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  RS

Weekday School \_\_\_\_\_ Grade \_\_\_\_\_

Child's Name \_\_\_\_\_ M\_\_\_\_/F\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_  RS

Weekday School \_\_\_\_\_ Grade \_\_\_\_\_

## YAHARZEIT REMINDERS

We will mail you a Yahrzeit reminder if you would like. Please list your relatives below.

Would you prefer a  *Hebrew Date* or  *Gregorian Date* anniversary reminder? **Please check one.**

\_\_\_\_\_  
Name Relationship and to whom? Date of Death (month, day & year)

\_\_\_\_\_  
Name Relationship and to whom? Date of Death (month, day & year)

\_\_\_\_\_  
Name Relationship and to whom? Date of Death (month, day & year)

\_\_\_\_\_  
Name Relationship and to whom? Date of Death (month, day & year)

\_\_\_\_\_  
Name Relationship and to whom? Date of Death (month, day & year)

\_\_\_\_\_  
Name Relationship and to whom? Date of Death (month, day & year)



**MEMBERSHIP CATEGORIES**

Age is based on oldest spouse.

**College Students**

≤ 25 \$88

**Single**

- 26-30 \$180
- 31 \$336
- 32 \$498
- 33 \$660
- 34 \$956
- 35 \$1,290
- 36 \$1,644
- 37 \$1,788
- 38 \$1,938
- 39 \$2,100
- 40-64 \$2,280
- Senior (65+) \$1,278

**Couples/Family**

- 26-30 \$336
- 31 \$498
- 32 \$660
- 33 \$1,152
- 34 \$1,632
- 35 \$2,268
- 36 \$2,652
- 37 \$2,976
- 38 \$3,288
- 39 \$3,462
- 40-64 \$3,648
- Senior (65+) \$1,824

**Associate Membership**

Primary residence out-of-state \$816

**Leadership Levels**

Giving at these levels enables our community to provide for those who are in need and provides support for unique programs. Support at leadership levels will be recognized in temple communications unless otherwise instructed.

- Builder** \$5,000
- Leader** \$7,500
- Visionary** \$10,000
- Tzedakah** \$ \_\_\_\_\_  
(any additional support above your membership level)

**RELIGIOUS SCHOOL**

Please select the grade(s) your child(ren) will attend. School health forms are available for completion online at templekolami.org/health/

- K-3 Sunday \$996
  - 4-6 Sunday \$1,296
  - 7 Sunday \$250
  - 8-12 Madrichim \$0
  - 8-9 L.A. Trip
  - 10-12 D.C. Trip
- Registration & Pricing at:  
templekolami.org/tkparents

**Religious School Tuition Policy**

Fees are a yearly obligation and not prorated for early withdrawals or late registration. Monthly autopay of membership fees and tuition is required for families with a child in Religious School. See FORM 4.

**Religious School fees are fully tax deductible.**

**ANNUAL SECURITY FEE**

\$400

The safety of our members, students, and staff is of the highest priority to the leadership of our congregation. This fee is paid in full at the beginning of the membership year and provides the funding to hire professional guards for our events, and to make physical/health security improvements to our facility.

MEMBERSHIP	+	TZEDAKAH	+	RELIGIOUS SCHOOL	+	\$400	=	\$	TOTAL
------------	---	----------	---	------------------	---	-------	---	----	-------

**PAYMENT OPTIONS**

*PLEASE NOTE: AN AUTOMATIC PAYMENT OPTION MUST BE SELECTED IF YOU HAVE CHILDREN IN THE EARLY CHILDHOOD CENTER AND/OR RELIGIOUS SCHOOL PROGRAMS*

**Payment by Check:**       Pay in Full \$ \_\_\_\_\_ (please enclose check when returning application)

**Automatic Withdrawal from Checking/Savings Account:**       Pay in Full \$ \_\_\_\_\_  
*please complete WITHDRAWAL AUTHORIZATION on FORM 4*       Monthly

**Automatic Credit Card/Debit Card Payments:**       Pay in Full \$ \_\_\_\_\_  
*please complete CREDIT CARD AUTHORIZATION on FORM 4*       Monthly  
*note: there is a 4% administrative fee for every credit/debit card transaction*

**Please Read and Sign Below**

Membership support and fees for the year are to be paid in full by June 30, 2027. There will be a charge of \$35.00 for insufficient funds. If opting to make monthly payments, the \$400 security fee is due/charged in full at the time of your first installment. A tax receipt will be provided for all payments at the end of the calendar year.

By completing this form, I agree to accept responsibility for the payment of all my financial obligations to Temple Kol Ami for the entire 2026-2027 fiscal year ending June 30, 2027, according to my chosen commitment.

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_



## CHECKING/SAVINGS WITHDRAWAL AUTHORIZATION AGREEMENT

I (We) authorize Temple Kol Ami to automatically withdraw all financial obligations, including, but not limited to Membership Support, Religious School, Early Childhood Center, Youth Group and other donations and pledges owed to Temple Kol Ami from my Checking/Savings Account. This authority is to remain in effect until I provide written notification to Temple Kol Ami to discontinue the use of the account number provided. Additionally, should I need to change the authorized account number, I (We) agree to provide a new account number with a new voided check/deposit slip.

As a convenience to me, I hereby request and authorize the banking institution below (the "Bank") to pay and charge to my account drafts on my account by and payable to the order of Temple Kol Ami, Scottsdale, AZ, provided there are sufficient collected funds in said account to pay the same upon presentation. I agree that the Bank's rights in respect to such draft shall be the same as if it were a check drawn on the bank and signed personally by me. This authority is to remain in effect until revoked by me in writing and until the Bank actually receives such notice. I agree that the bank shall be fully protected in honoring any such draft. I further agree that if any such draft be dishonored, whether with or without cause and whether intentionally or inadvertently, the Bank shall be under no liability whatsoever. Should any draft not be honored by the Bank upon presentation, I understand that this method of payment may be terminated.

Please select which account you would like to use:

Checking

Savings

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***Please attach a voided check here.***

## CREDIT CARD AUTHORIZATION AGREEMENT

I (We) authorize Temple Kol Ami to process all financial obligations, including but not limited to, Membership Support, Religious School, Youth Group, Early Childhood Center, and other donations and pledges owed to Temple Kol Ami on my credit card. This authority is to remain in effect until I provide written notification to Temple Kol Ami to discontinue the use of the card provided. Additionally, should I need to change the authorized credit card number, I (We) agree to provide a new credit card number either in writing or via telephone authorization.

*please note: there is a 4% administrative fee for every credit/debit card transaction*

VISA

MasterCard

Discover

American Express

Name (as it appears on card): \_\_\_\_\_

Credit card number: \_\_\_\_\_ Exp.: \_\_\_\_\_ Sec. Code: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_



# eBrew

ONLINE HEBREW LEARNING AT TKA

**CONVENIENT.**

**INTERACTIVE.**

**MEANINGFUL.**

We are excited to tell you about our online Hebrew School program, eBrew, at Temple Kol Ami. Now you can learn Hebrew from the comfort of your home, on your schedule! TKA's eBrew program is fun, convenient, and meaningful -- it's learning at the click of a button.

### **NOT JUST FOR KIDS.**

eBrew is can be used by adults, too!

Sign up for one-on-one Hebrew learning -- whether you need a refresher or are starting from scratch -- we have an online program for you. Would you like to learn the prayers form Shabbat service? Interested in learning conversational Hebrew? eBrew is perfect for you!

**CALL THE TEMPLE OFFICE TO LEARN MORE ABOUT TKA'S EBREW PROGRAM! (480) 951-9660**



### TKA'S MISSION

Temple Kol Ami is a warm and friendly Reform Congregation. Our Mission is to improve and inspire the lives of all generations through "Doing Jewish." We provide opportunities to experience the spirituality and vitality of Judaism. Through innovative education and worship we instill core Jewish values that bring us all to a better world.

### TKA'S VISION

We accomplish our mission through inspiring services and experiential programs, community service (tikkun olam), and deep appreciation for tradition.

We offer unique experiences:

**Participatory Shabbat services that engage all segments of our community.**

Creative and experiential educational programs for children and adults.

**Meaningful social action that helps our broader community.**

B'nai Mitzvah preparation and services that are tailored to each child.

### ANY QUESTIONS?

Email **Rabbi Schneider** at: [rabbi@templekolami.org](mailto:rabbi@templekolami.org)

Email **Allison Galvin** at: [director@templekolami.org](mailto:director@templekolami.org)

#### CLERGY

Rabbi Jeremy Schneider, RJE  
Cantor Noa Shaashua  
B. Charles Herring, Rabbi Emeritus  
Raina Sinclair, Cantor Emeritus

#### TEMPLE STAFF

Allison Galvin, Executive Director  
Rachael Valentine, Youth Director  
Christina Pfnister, Finance Director  
Sedona Eberspecher, Marketing Director  
Erika Parsel, Executive Assistant

#### EARLY CHILDHOOD CENTER STAFF

Nicole Stokes, ECC Director  
Erika Curtis, ECC Assistant Director

#### BOARD OF TRUSTEES

Russ Palay | President  
Courtney Beyer | Co-Vice President  
Michelle Abrams | Co-Vice President  
Ted Frumkin | Co-Treasurer  
Arin Finger | Co-Secretary  
Irwin Grossman | Co-Secretary  
Paige Cohen  
Ken Reiss  
Michael Schefman  
Marci Gluck- Stewart  
Beth Weinstein  
Ian Cranmer  
Bailey Tocco  
Tammi Goldberg  
Michael Blaire



**PLEASE RETURN COMPLETED PACKET TO:**

**Temple Kol Ami | 15030 N. 64th St., Scottsdale, AZ 85254**



**TEMPLE KOL AMI**  
It's Where We **Do Jewish**

