



HEBREW EDUCATIONAL ALLIANCE

Phone 303/758-9400 • Fax 303/758-9500 • Preschool 303/758-1462
3600 South Ivanhoe Street, Denver CO 80237-1196
info@HEAdenver.org • www.HEAdenver.org

Dear Friends,

Thank you for expressing interest in membership at the Hebrew Educational Alliance. The HEA has long been one of the major Jewish institutions in Colorado. Established over 78 years ago as a modern Orthodox congregation in West Denver, we moved some 14 years ago to our present location. We are a vibrant and thriving Conservative congregation with a membership of approximately 950 families. We are one of the largest Conservative synagogues between the Mississippi and the West Coast, but still succeed in maintaining a warm and welcoming atmosphere. In fact, members will tell you that the synagogue is their second family.

We are extremely proud of our clergy. Rabbi Bruce Dollin and Cantor Martin Goldstein are considered to be among the top Jewish leaders in the Rocky Mountain region. We have recently welcomed Rabbi Salomon Gruenwald to be our Assistant Rabbi. We are fortunate to have a talented and dedicated staff of administrators, religious and preschool educators, youth leaders, volunteer board, and committee members. We offer our membership a multitude of services. These include daily *minyanim*, Shabbat and holiday services, education opportunities for all ages from preschool through seniors, youth programs in our unique Goldberger Youth Center, social activities, chavurot, and special events.

We welcome the active involvement and participation in the congregation by our entire membership. Feel free to contact me or our Executive Director, Neal Price if you need further information about the HEA. I hope to welcome you to the Alliance community and invite you to visit our congregation at any time, where it would be my pleasure to personally meet with you.

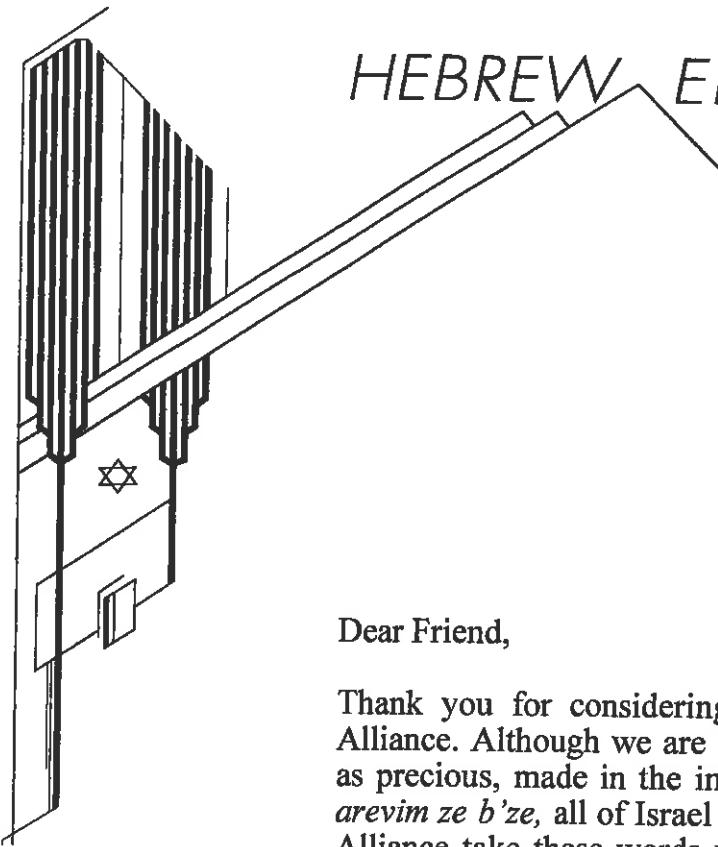
B'Shalom,

Rick Rubin

Rick J. Rubin
President

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Dear Friend,

Thank you for considering membership at the Hebrew Educational Alliance. Although we are a large congregation, we see every member as precious, made in the image of God. Our Sages tell us, *kol yisrael arevim ze b'ze*, all of Israel is responsible for one another and we at the Alliance take these words very seriously. Becoming a member of the Alliance places you within our extended family. Jews have depended on each other for millennia, and we continue that tradition in our synagogue community.

As a Conservative congregation, we uphold the importance of Jewish tradition and Jewish law. At the same time, our approach is to meet every congregant wherever he/she happens to be in his/her level of Jewish knowledge and experience. God makes no distinctions amongst Jews and neither do we. Our goal is to encourage your religious and spiritual growth. We seek to provide many and varied experiences for you and your family to learn and practice our profound and beautiful religious traditions. Our "ideal" Jew is a searching and learning Jew.

You are welcome here and we cherish your presence.

B'shalom,

Rabbi Bruce Dollin

Rabbi Bruce Dollin

The Hebrew Educational Alliance operates on a May 1-April 30 fiscal year. Dues, for those joining after the beginning of the fiscal year, will be prorated. For purposes of dues billing, all memberships run from May 1-April 30. Those joining during other months will have their dues prorated. All members are then billed for a new year on May 1. If you have financial concerns or questions, please contact our Executive Director, Neal Price at 303/758-9400 x204, nprice@headenver.org. Please submit this form and your check to the HEA. We welcome your membership in the Congregation Hebrew Educational Alliance.

SELECT ONE	<input type="radio"/> Rabbi's Circle	<input type="radio"/> Patron	<input type="radio"/> Chai	<input type="radio"/> Membership Plus	<input type="radio"/> Couple or Family	<input type="radio"/> Single	<input type="radio"/> Young Family (30 & Under)	<input type="radio"/> Young Single (30 & Under)	<input type="radio"/> Associate* (See Note)
YEARLY	\$11,950	\$6,750	\$4,850	\$3,550	\$2,075	\$1040	\$1,390	\$700	\$700

*Associate Membership is open to members of other Denver synagogues and those not living in the Denver metropolitan area. This type of membership does NOT include High Holiday tickets, and children of Associate Members are NOT entitled to enroll in the Religious School or receive a *bar/bat mitzvah* date.

Three Ways to Receive a Dues Rebate: Due to the high cost of processing credit cards, the Finance Committee will provide a \$50 dues rebate for all two-adult memberships and a \$25 for all single-adult and all associate memberships. To receive your rebate, simply pay your dues by 1) check, 2) cash, or 3) EBT (Electronic Bank Transfer.) For EBT, fill out and return the enclosed form. For credit card use, complete the information in the box below.

Payment Frequency

Dues are billed and may be paid on annual, semi-annual, quarterly, or monthly basis. My/our membership will be paid (select one)

Annually Semi-annually Quarterly Monthly

The congregation requests that a first payment based on this schedule accompany this form. Amount enclosed \$ _____

Payment Method

I wish to pay by check, cash, or electronically

-OR-

I wish to pay by credit card.



Please bill my Visa MasterCard Discover

Number _____ Expiration Date _____

Name on Card _____ Security Code _____

Signature _____

Maintenance Reserve Fund

From 1994 through 2008, as part of their financial obligation to the congregation, members of the HEA were asked to contribute to the Capital Campaign that financed the construction of the synagogue, and later, the Goldberger Youth Center (GYC.) In 2006 the mortgage on the synagogue was retired, and by late 2010, the GYC will be paid in full. In 2009, the Building Committee prepared a study showing that over the next decade \$700,000 will need to be raised to repair and maintain the major components of our buildings. Following your first year of membership, you will be contacted to participate in a three-year pledge to the Maintenance Reserve Fund. If you have any questions, please contact Neal S. Price, Executive Director, at 303/758-9400 x 204 or nprice@HEAdenver.org. Thank you for your support.

HEA PLUS MEMBERSHIP CATEGORIES

May 1, 2010 – April 30, 2011

Membership-Plus \$3,550

- Annual Dues
- Admission for Fall Fundraising Event (to be announced)
- Admission to Spring 2011 Fundraising Event (to be announced)
- Sponsorship of all Purim bags
- \$1,200 of contribution to be credited to Alliance Preschool Development Fund to qualify for Colorado Childcare Tax Credit

Chai membership \$4,850

- Annual Dues
- Admission for Fall Fundraising Event (to be announced)
- Admission to Spring 2011 Fundraising Event (to be announced)
- Sponsorship of all Purim bags
- \$1,900 of contribution to be credited to Alliance Preschool Development Fund to qualify for Colorado Childcare Tax Credit

Patron membership \$6,750

- Annual Dues
- Admission for Fall Fundraising Event (to be announced)
- Admission to Spring 2011 Fundraising Event (to be announced)
- Sponsorship of all Purim bags
- Sisterhood and Brotherhood membership
- Yizkor Book listings
- \$2,800 of contribution to be credited to Alliance Preschool Development Fund to qualify for Colorado Childcare Tax Credit

Rabbi's Circle membership \$11,950

- Annual Dues
- Reserved High Holy Days seats in the Sanctuary
- Reserved parking for the High Holy Days
- Admission for Fall Fundraising Event (to be announced)
- Admission to Spring 2011 Fundraising Event (to be announced)
- Sponsorship of all Purim bags
- Unlimited donation cards (in memory of, in honor of, etc.)
- Admission to all congregational events, i.e. Hanukkah and Purim dinners, luncheons, adult education classes, concerts, seder, etc.
- Sisterhood and Brotherhood membership
- Yizkor Book listings
- \$7,000 of contribution to be credited to Alliance Preschool Development Fund to qualify for 50% Colorado Childcare Tax Credit.

**On the REVERSE SIDE is a brief summary of the
2010 Colorado Childcare Tax Credit**

2010 Colorado Childcare Tax Credit

Please note that the example below is for a Patron's \$2,800 Childcare Tax Credit (balance of the \$6,750 contribution is tax deductible.) All other categories are comparably calculated at their appropriate level. For the example below, it is assumed that members in any of the four categories are in 35% tax bracket. (Please check with your account for your particular tax situation.)

<u>Preschool Donation</u>	<u>\$2,800</u>
Colorado State Income Tax Credit	\$1,400
Federal Tax Savings	\$ 490
<u>Colorado Income Tax Savings</u>	<u>\$ 130</u>
Returned to You at Tax Time	\$2,020

Net Cost of Your \$2,800 Preschool Contribution \$780

The Jewish Community Center, Yeshiva Toras Chaim, the Allied Jewish Federation and numerous other institutions in Colorado have used the above Child Care Contributions Credit program to raise funds for their institutions. If you or your advisor has any questions, please contact Neal Price who will be able to put you in touch with a qualified tax expert to further explain this provision of Colorado tax law.



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DIRECT DEBIT

We're pleased to offer you a new bill payment convenience — *Direct Debit*. Now, you can have your bill payment automatically debited from your checking or savings account. And, you don't have to change your present banking relationship to take advantage of this service.

Direct Debit will help you in many ways.

- ✓ Save time in writing checks.
- ✓ Saves money — no more postage, envelopes and trips to the post office.
- ✓ Eliminate the possibility of lost, stolen, or forged checks.
- ✓ Direct Debit ensures your payment is received on time.
- ✓ Direct Debit allows payments to be made when you're on vacation, sick, or away on business.

Here's how Direct Debit works:

On the date determined by you and the company offering the service, your payment will automatically be debited from the account you have authorized. The amount debited will appear on your monthly bank statement.

We believe you'll like the added convenience of having your Payment automatically withdrawn for you. Direct Debit is safe, convenient, and easy. To take advantage of this service, please complete the attached authorization form and return it to the Congregation Hebrew Educational Alliance.

The authorization form below gives the company offering this service and your financial institution the authority to debit your account. Simply complete the form to take advantage of Direct Debit.

1. Mark the account-type box to indicate from where your direct debit should be taken. Your checking or savings account.
2. Fill in your name, name and location of your financial institution, and the date.
3. Attach a **voided check** for verification of all financial institution information. If you're unable to attach a voided check, please fill in your transit/routing number and account number.
4. Be sure to sign the form!

CUSTOMER'S AGREEMENT — Please fill out the Agreement on the reverse side and return to the HEA.

CHILDREN THROUGH COLLEGE

1 Male Female

English Name _____
Hebrew Name _____
Date of Birth _____ Place of Birth _____
Jewish by Birth Yes No
If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____

2 Male Female

English Name _____
Hebrew Name _____
Date of Birth _____ Place of Birth _____
Jewish by Birth Yes No
If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____

3 Male Female

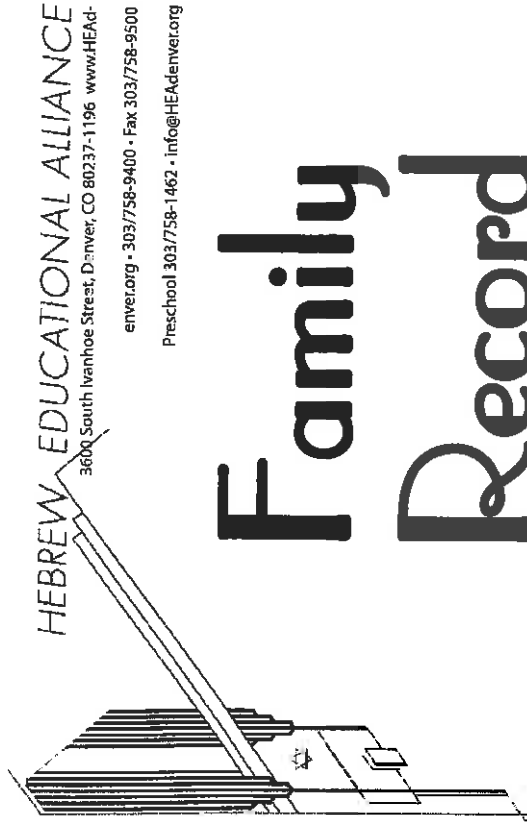
English Name _____
Hebrew Name _____
Date of Birth _____ Place of Birth _____
Jewish by Birth Yes No
If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____

4 Male Female

English Name _____
Hebrew Name _____
Date of Birth _____ Place of Birth _____
Jewish by Birth Yes No
If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____

5 Male Female

English Name _____
Hebrew Name _____
Date of Birth _____ Place of Birth _____
Jewish by Birth Yes No
If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____



Family Record

Name _____
First _____ Last _____
Address _____
City _____ State _____ Zip _____
Phone _____ Date Joined HEA _____

Please attach a photo of yourself or family.

Previous Congregation _____ City _____ State _____

ADULT 1 Male Female (Please Print)

English Name _____

Hebrew Name _____

BIRTH
Date of Birth _____ Place of Birth _____

Check One Kohen Levi Israelite

Jewish by Birth Yes No

If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____

MARITAL STATUS

Single Widowed Divorced Married --- date _____

FATHER

Father's English Name _____

Father's Hebrew Name _____

MOTHER

Mother's English Name _____

Mother's Hebrew Name _____

YAHZET (Please complete this information if you want to be notified.)

1 Relationship to Adult 1 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after sunset? Yes No

Place Buried _____

2 Relationship to Adult 1 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after sunset? Yes No

Place Buried _____

3 Relationship to Adult 1 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after Sunset? Yes No

Place Buried _____

4 Relationship to Adult 1 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after Sunset? Yes No

Place Buried _____

ADULT 2 Male Female (Please Print)

English Name _____

Hebrew Name _____

BIRTH
Date of Birth _____ Place of Birth _____

Check One Kohen Levi Israelite

Jewish by Birth Yes No

If "No" Date of Conversion _____ Rabbi _____
Place of Conversion _____

MARITAL STATUS

Single Widowed Divorced Married --- date _____

FATHER

Father's English Name _____

Father's Hebrew Name _____

MOTHER

Mother's English Name _____

Mother's Hebrew Name _____

YAHZET (Please complete this information if you want to be notified.)

1 Relationship to Adult 2 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after sunset? Yes No

Place Buried _____

2 Relationship to Adult 2 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after sunset? Yes No

Place Buried _____

3 Relationship to Adult 2 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after Sunset? Yes No

Place Buried _____

4 Relationship to Adult 2 _____

English Date of Death (month/day/year) _____

-or- Hebrew Date of Death (month/day/year) _____

Did the death occur after Sunset? Yes No

Place Buried _____



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HEBREW EDUCATIONAL ALLIANCE CREDIT CARD AUTHORIZATION FORM

I, _____, HEREBY AUTHORIZE ON THIS
_____ DAY OF _____, 20____ the Hebrew Educational Alliance to
charge my credit card for the following charges:

- DUES AND RELIGIOUS SCHOOL FEES, IF APPLICABLE
- BUILDING PLEDGE

YOUR CREDIT CARD WILL BE CHARGED YEARLY, SEMI-ANNUAL, QUARTERLY OR
MONTHLY BASED ON YOUR BILLING CYCLE.

THIS AUTHORIZATION WILL REMAIN IN EFFECT UNTIL YOU NOTIFY US IN
WRITING TO TERMINATE THIS AGREEMENT.

VISA, MASTERCARD OR DISCOVER ONLY

ACCOUNT # _____

EXPIRATION DATE: ____/____

3 DIGIT CODE ON BACK OF CARD _____

NAME AS PRINTED ON CARD:

ADDRESS TO WHERE CARD IS BILLED:

CARDHOLDER SIGNATURE: _____