



YICC MEMBERSHIP 5771 (2010/2011)

Sivan 5770 – May 2010

Dear Friend,

It's amazing, but another year has passed, and we are now planning an exciting, creative and spiritually invigorating 5771. Your participation and membership are deeply appreciated and make YICC the special Shul we are all proud of.

Yom Tov is early this year – September 9th! **We will hold Yom Tov seats for our members until July 23rd**, after which seats will be assigned on a first come, first served basis. Additional seat requests will be allocated on an “as available” basis. **Seats will only be assigned when your account is current, and your membership form is accompanied by full payment -- or a pre-arranged/approved payment schedule.**

Following is our Membership Dues Schedule for 5771 (2010-2011). Please note that our total Membership Dues includes a security fee and the surcharge each member pays for our local Eruv, and the National Council of Young Israel (listed under “Other” and broken down below).

CATEGORY	# OF SEATS INCLUDED	SHUL DUES	SECURITY	OTHER	TOTAL DUE
Family Membership	2	\$1,466	180.00	\$79.00*	\$1725
Single Membership	1	736	90.00	79.00*	\$ 905
1st Year Married (only applicable to first marriage for both partners)	No seats included, but they are available for purchase at \$200 each.	0	180.00	79.00*	\$259.00
2nd Year Married	2	556	180.00	79.00*	\$ 815
College Student	1	91	90.00	79.00*	\$ 260
Each Additional High Holiday Seat (for either an adult or child)					\$200.00
Associate Family Membership**	0	680		0	\$680
Associate Single Membership**	0	450		0	\$450

*\$79 includes payments of \$54 for the Eruv, and \$25 in dues to the National Council of Young Israel.

****ASSOCIATE MEMBERS:** Please note that this membership category is only for those individuals or families who are primarily members in other synagogues, but would, nevertheless, like to be associated with our Shul. Associate Membership does not apply to those who are away for the High Holidays but daven with us the rest of the year.

Once again our Shul will be offering three different Minyanim in order to accommodate all who wish to daven at YICC. Please indicate on your membership form which Minyan you would like to attend.

Please return your completed membership form with payment. We would appreciate your prompt response.

Thank you.

Allan Sternberg
President

Geri Wiener
Chairman of the Board



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9317 WEST PICO BOULEVARD LOS ANGELES, CA 90035 (310) 273-6954 FAX: (310) 273-7103 WWW.YICC.ORG SHULOFFICE@YICC.ORG

Please take a few minutes to complete this form which is designed to tell us more about the people who make up our membership, and to better serve your needs. The information is for internal use only. While we do maintain a very current database, we need this form to assign seats and for reference purposes.

FAMILY MEMBERSHIP & HIGH HOLIDAY SEATS DATA • 5771 (2010-2011)

Husband's Name _____

Wife's Name _____

Address _____

Home Contact #s Tel: _____ Fax: _____ Email: _____

His Occupation _____ His Cell# _____

His Contact #s Tel: _____ Fax: _____ Email: _____

Her Occupation _____ Her Cell# _____

Her Contact #s Tel: _____ Fax: _____ Email: _____

Wedding Anniversary Date: _____

ONLY IF you would like to DONATE BLOOD for our community, please indicate your blood type below:

Husband's Blood Type _____ Wife's Blood Type _____

CHILDREN

Living at home (please use the back of this form to list additional children):

Name	Date of Birth	Name of School	Entering Grade	Email address if applicable

CHILDREN

Not living at home: (please use the back of this page to provide additional info if needed)

Name	Spouse	School	Email	Phone

HIGH HOLIDAY SEATING REQUEST (Please remember: family membership entitles you to 2 adult seats)

Please check the boxes that clearly indicate your seating needs.

Yes, we need seats.

If yes, where? Main Sanctuary The Mark Pat's

For when? Both Rosh HaShanah & Yom Kippur Rosh HaShanah only Yom Kippur only

No, we do not need seats

Please indicate your request for EXTRA seats below (this will be for your children or guests – not yourself):

Note: In accordance with our policy seats can only be requested for children one year prior to Bar/Bat Mitzvah.

• Number of **EXTRA** seats needed: In Men's section _____ In Women's section _____

• For the following occupants (please provide names): _____

COMMENTS/SEATING REQUEST:



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SINGLE MEMBERSHIP & HIGH HOLIDAY SEATS DATA • 5771 (2010-2011)

Name _____

Address _____

Home Contact #s ☎: _____ Cell: _____ Fax: _____ Email: _____

Occupation _____

Work Contact #s ☎: _____ Fax: _____ Email: _____

ONLY IF you would like to DONATE BLOOD for our community, please indicate your blood type below:

Blood Type _____

CHILDREN (if applicable)

Living at home:

Name	Date of Birth	Name of School	Entering Grade	Email address if applicable

CHILDREN (if applicable)

Not living at home: (please use the back of this page to provide additional info if needed)

Name	Spouse?	School	Email	Phone

HIGH HOLIDAY SEAT REQUEST (Please note: Single membership entitles you to 1 adult seat)

Please check the boxes that clearly indicate your seating needs.

Yes, I need a seat

If yes, where? Main Sanctuary The Mark Pat's

For when? Both Rosh HaShanah & Yom Kippur Rosh HaShanah only Yom Kippur only

No, I do not need a seat

Please indicate your request for **EXTRA** seats below (this will be for your children or guests only):

Note: In accordance with our policy seats can only be requested for children one year prior to Bar/Bat Mitzvah.

• Number of EXTRA seats needed: In Men's section _____ In Women's section _____

• For the following occupants – please list names: _____

COMMENTS/SEATING REQUEST: