Confidential Membership Commitment Form
July 2019 – June 2020

Membership Name(s): _______________________________________________________________

Your pledge is confidential. It allows us to support our programming, staffing and services for the year. Unlike many other synagogues, we do not use a fee-for-service model or a flat fee membership model. If we used one of these types of models, the cost would be about $3,000 per member household, based on our actual (annual) expenses. Instead, for membership, we ask that you make a pledge based on your own evaluation of your income/assets in order to give what is comfortable and feasible for you. We hope you will consider a pledge based on what Sha’ar Zahav means to you now -- and what it will mean to you in the years to come.

As a new member of Sha’ar Zahav, I/we would like to pledge the following amount for my annual membership commitment:

$______________________ per month  or  $______________________ per year

I/We will honor this commitment (as applicable)

___Monthly Payments (through June 2020)
___In Full

Payment:
___Online (Paypal)
___By Check

Signature:__________________________________  Date:_______________

Signature:__________________________________  Date:_______________

Please return this pledge form to Congregation Sha’ar Zahav:
Mail: 290 Dolores Street, San Francisco, CA 94103
Email: office@shaarzahav.org
Fax: 415-861-6081