



Har Mishpacha



P.O. Box 776108
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Steamboat Springs
Jewish Congregation

July, 2010

Dear Members and Friends of the Har Mishpacha Family,

With the help of more participating Har Mish members than ever during this year, our Congregation has enriched itself to more educational programs, social opportunities and again, Family and Home Shabbat services for all. Indeed, hoping to observe our Shabbats as much as feasible, Shabbat services in the Yampa Valley are being provided on a regular basis—more than 50% of the time (and even without a physical “home!”).

With deep regrets, our devoted “Rab Joe”, Rabbi Joseph Goldman, will be leaving at the end of December. At the same time, we are looking forward to continuing the inspiration he provided with new Rabbinical leadership, now being actively sought. We Har Mish families intended to build on the progress of the past year by innovation from our devoted Board and volunteers, by Shabbat observance, by Sunday School and pre/post Bar/Bat Mitzvot programs and, of course, by continuing to seek a home for our Congregation. This will take time, devotion and, yes, money, to make all of this real.

I am looking forward to the growth of our “Mountain Family”, asking each of you to consider volunteering to make this growth happen. Please consider how your expertise, time and devotion can be applied to a mitzvot.

Shalom,

Bert Halberstadt
President

Yes I want to help:

Name: _____ Phone: _____

Email address: _____

- | | |
|-------------------------------------------------------------------------|---------------------------------------------------------------|
| <input type="checkbox"/> Sponsor an Oneg Shabbat | <input type="checkbox"/> Help organize the Chanukah party |
| <input type="checkbox"/> Host the Sukkot Celebration | <input type="checkbox"/> Help organize the Purim Party |
| <input type="checkbox"/> Host a Shabbat service in my home | <input type="checkbox"/> Lead the community Seder |
| <input type="checkbox"/> Organize a Shabbat potluck dinner | <input type="checkbox"/> Assist teaching Sunday School |
| <input type="checkbox"/> Assist teaching Hebrew School | <input type="checkbox"/> Be a Board member |
| <input type="checkbox"/> Organize a community Mitzvah project | <input type="checkbox"/> Adult Education Committee discussion |
| <input type="checkbox"/> Play a musical instrument in our services | <input type="checkbox"/> Website Advisory Committee |
| <input type="checkbox"/> Provide a residence for the Rabbi/Guest visits | <input type="checkbox"/> Join the House Maintenance Committee |
| <input type="checkbox"/> Other _____ | |



**Har Mishpacha Membership Application
2010-2011 (Fiscal Year September 1 – August 31)
Please note: Tickets will be required to attend
High Holiday Services.**

NAME(S) _____ IS/ARE JOINING AS:

FAMILY Dues (includes Religious School Tuition) \$600.00 _____

COUPLE \$400.00 _____ SINGLE Full Membership \$200.00 _____

SINGLE HIGH HOLIDAY ONLY \$100 (per adult) _____

HIGH HOLIDAY PRAYER BOOK FUND (\$20/EA)

In Honor of: _____ In Memory of: _____

ADDITIONAL CONTRIBUTION

Building fund: _____ Scholarships: _____

TOTAL AMOUNT OF DUES AND CONTRIBUTION (*Tax Deductible*) _____

For our database, please update any changes in the following:

Email address: _____

Family members (Names, birthdates, anniversaries): _____

Address: _____

Home phone: _____ *Work/cell phone:* _____

All dues and donations must be paid upon receipt of this notice by check payable to HAR MISHPACHA or credit card. If you wish to pay by credit card, please complete and return the attached authorization form with your application.

No person or family shall be denied membership, High Holiday admission, or participation in Har Mishpacha programs when due solely to financial hardship. Please contact Karen Schiller (*KarenS@harmishpacha.org*) or call (970) 457-4270 before the High Holidays if you would like to set up a payment plan or need financial assistance.

Har Mishpacha Credit Card Authorization

I would like to charge my membership dues in the amount of

\$_____ to my Credit Card:

___ Visa ___ MasterCard ___ American Express ___ Discover

Credit Card No. _____

Exp. Date _____

CVV number _____ (For MasterCard or Visa, it's the last three digits in the signature area on the back of your card. For American Express, it's the four digits on the front of the card.)

Name as it appears on credit card: _____

Billing Address: _____

Billing City/State/Zip: _____

Home telephone number: _____

Email: _____

Signature _____
(Required)