

Dear CBS Family,

Welcome back after what I hope was a wonderful summer for each of you! While Congregation Bayt Shalom historically quiets down a bit during the summer, this year was a different story.

I'd like to begin by extending a warm welcome to Rabbi Nicole Luna and her husband, Dr. Joe Bord, who became "official" members of our CBS community August 1st, but who became members of our CBS family weeks prior. Rabbi Luna and Dr. Bord come to us from New York where Rabbi Luna was ordained in May. Rabbi Luna gave many hours of her time prior to her start date to meet and speak with me and others so she could hit the ground running on August 1st.

I appointed an ad-hoc transition committee late last spring to help the community and the Rabbi through the first few weeks of our transition to new pulpit leadership. Al Schreier has very capably led this effort; the additional members of the committee are Todd Savitt, Michael Schinasi, Russ Needell, Carol Woodruff and Donna Brody. These individuals have given much of their time and effort to help Rabbi Luna get settled in Greenville, and to facilitate meeting congregation and community members.

In addition, Rabbi Luna and I will be participating in a months-long seminar offered by the URJ that is designed for Rabbis and Presidents to guide us through several issues related to congregational transition. The seminar culminates with a two-day retreat in February. Thirty-one URJ congregations are undergoing a transition such as ours and are expected to participate, as well.

This is an excellent time to re-acquaint yourselves with our community. Please look over the calendar and join us at one or more of the several activities we have planned. The Rabbi and committees will be working very hard in order to offer activities, classes and opportunities for varied levels of interest.

**The following items are attached as files and downloadable as PDFs at [www.baytshalom.org](http://www.baytshalom.org) :**

**Please print and fill them out and mail to:**

**Congregation Bayt Shalom  
P.O. Box 2713  
Greenville, NC 27836  
Attn: Treasurer**

- **Annual Dues and Fees Statement - due August 25**
- **Member Information Form (return if there are changes)**
- **Religious School Registration Form**
- **High Holiday Schedule**
- **Additional Contributions Form**
- **Sisterhood Membership Form**

**Annual Dues and Fees Statement** Your enclosed statement will show an itemized listing of the 2011-2012 financial commitments. Max Valdman, the treasurer, will email you your outstanding dues from 2010/2011. Please review the information closely and return the

**forms along with your dues by August 25. The Ritual Committee is ready to assign honors (aliyot and readings) for this year's High Holidays based on a list of members as of September 1. Special financial requests should be directed to the Treasurer, Max Valdman (558-1933 or [treasurer.cbs@gmail.com](mailto:treasurer.cbs@gmail.com)) or the President, Samantha Pilot 341-2891 or [fiveyankees2@aol.com](mailto:fiveyankees2@aol.com)). All financial matters are held in the strictest confidence.**

**Religious School Registration Form**

**Classes start Sunday, August 28, 2011 at 9:30 AM. Please return your school fees and registration form by August 25. School tuition for members was increased slightly to cover the cost of a new curriculum.**

As always, we welcome your participation. Please feel free to contact me, Rabbi Luna or any board member to let us know how you would like to be involved.

From my family to yours, a happy, healthy and prosperous new year –

Samantha Pilot  
President, Congregation Bayt Shalom

*Shalom from Rabbi Nicole Luna:*

We all have a reason for why a vibrant Jewish community is important to us. Perhaps we feel a responsibility to continue the tradition or we're new spiritual seekers who have found meaning in Judaism. Perhaps we want to provide a Jewish education for our children or enhance our own knowledge and understanding of our religion. Particularly in a smaller town, perhaps we know that without each person's involvement and support, a Jewish community could not flourish.

As I start my rabbinate at Congregation Bayt Shalom, I am beginning to learn all the myriad of reasons why Jews in eastern North Carolina feel that Jewish community is important to them. This process of discovery will be core to my rabbinate. By understanding the passions and motivations of each individual together we can build a strong and growing Jewish community. To that end, I look forward to meeting each of you, hearing about your Jewish experiences, and why Jewish community is important to you. Please feel free to be in touch!

B'shalom,

Rabbi Nicole Luna  
375-4615

**CONGREGATION BAYT SHALOM**  
**Annual Dues/Fees Statement**

Member(s): \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ E mail address: \_\_\_\_\_

Our **current** fiscal year runs from September 1, 2011 to August 31, 2011. Your remaining balance for **this** year will be emailed to you by the treasurer. Please enclose payment. \$ \_\_\_\_\_

Please fill in the appropriate amounts in the spaces below for the **upcoming** fiscal year (September 1, 2011 to August 31, 2012):

<b>DUES:</b>	Family	\$1854	\$ _____
	Couple ( <i>see below</i> )	\$1545	\$ _____
	Individual	\$1340	\$ _____

*A couple is married Jewish adults without dependents or single Jewish adult with dependents.*

**RELIGIOUS SCHOOL:** full payment required by school registration date of August 25, 2011

Each child	Member Sunday school	\$200	\$ _____
	Non-member Sunday school	\$550	\$ _____
	Member Thursday school	no fee	
	Non-member Thursday school	\$225	\$ _____
	Materials fee <i>per child</i>	\$50	\$ _____

**BAR/BAT MITZVAH INSTRUCTION:**

Member	no fee	
Non-member	\$150	\$ _____

**BUILDING USE** for special occasions:

Member	no fee	
Non-member	\$100	\$ _____

**ADDITIONAL CONTRIBUTIONS:** \$ \_\_\_\_\_

**RABBI'S DISCRETIONARY FUND:** \$ \_\_\_\_\_

**TOTAL:** \$ \_\_\_\_\_

I/we wish to pay (check one):

<input type="checkbox"/> Annually	Due 9/1/11
<input type="checkbox"/> Semi-annually	Due 9/1/11.....3/1/12
<input type="checkbox"/> Quarterly	Due 9/1/11.....12/1/11.....3/1/12.....6/1/12
<input type="checkbox"/> Monthly	Due 9/1/11.....10/1/11.....11/1/11.....etc

*PLEASE* mark your calendar for these dates!

I understand my financial responsibility to Congregation Bayt Shalom

Responsible Party Signature _____	Date _____
Responsible Party Signature _____	Date _____

**Please return this form by August 25, 2011**

Make checks payable & return to: Congregation Bayt Shalom, PO Box 2713,  
Greenville, NC 27836 Att: Treasurer

Please contact Max Valdman, Treasurer (558-1933 or [treasurer.cbs@gmail.com](mailto:treasurer.cbs@gmail.com)) or Samantha Pilot, President (341-2891 or [fiveyankees2@aol.com](mailto:fiveyankees2@aol.com)) if you need to make special financial arrangements. All special arrangements are confidential.

**CONGREGATION BAYT SHALOM  
MEMBER INFORMATION FORM**

Family Last Name: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Type of Membership: [ ] Family [ ] Couple [ ] Individual [ ] New Member

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**Member 1**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

Business Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Check one: [ ] Kohayn [ ] Levi [ ] Yisroel

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**Member 2**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Anniversary: \_\_\_\_/\_\_\_\_/\_\_\_\_

Business Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Check one: [ ] Kohayn [ ] Levi [ ] Yisroel

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**DEPENDENTS**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

**CONGREGATION BAYT SHALOM  
MEMBER INFORMATION CHANGE FORM**

***PLEASE RETURN ONLY IF THERE HAS BEEN A CHANGE IN THE PAST YEAR***

Family Last Name: \_\_\_\_\_ Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_ Zip: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Type of Membership: [ ] Family [ ] Couple [ ] Individual [ ] New Member

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**Member 1**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

Business Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Check one: [ ] Kohayn [ ] Levi [ ] Yisroel

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**Member 2**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Hebrew Name: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_ Anniversary: \_\_\_\_/\_\_\_\_/\_\_\_\_

Business Phone: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_ Check one: [ ] Kohayn [ ] Levi [ ] Yisroel

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**DEPENDENTS**

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Hebrew Name: \_\_\_\_\_

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<b>Congregation Bayt Shalom</b> <b>Religious &amp; Hebrew School Registration Form (2011/2012)</b>
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Parents/Guardian \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email \_\_\_\_\_

**Children attending Religious and/or Hebrew School:**

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Hebrew Name \_\_\_\_\_ Grade \_\_\_\_\_  
 Sunday Religious School       Hebrew School

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Hebrew Name \_\_\_\_\_ Grade \_\_\_\_\_  
 Sunday Religious School       Hebrew School

Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Hebrew Name \_\_\_\_\_ Grade \_\_\_\_\_  
 Sunday Religious School       Hebrew School

Other Siblings Name(s) and birthdate(s): \_\_\_\_\_

Please list any allergies or medical conditions we should be aware of: \_\_\_\_\_  
 \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

**TUITION (complete on "Fees/Dues Statement):**

	<u>MEMBER</u>	<u>NON-MEMBER</u>
<b>Sunday Religious School:</b>		
Education Fee per child	\$200	\$550
Materials Fee per child	\$50	\$50
<b>Thursday Hebrew School</b>	no fee	\$225
<b>Bar/Bat Mitzvah Instruction</b>	\$150	N/A
<b>Bar/Bat Mitzvah Building Use Fee:</b>	\$100	N/A

**NOTE:** No child will be denied a Jewish education. Please contact the CBS Treasurer Max Valdman at 558-1933 or by email at [treasurer.cbs@gmail.com](mailto:treasurer.cbs@gmail.com), if you need to make special arrangements. All financial arrangements are confidential.

## Schedule of Services August 2011- October 2011

Also available at [www.baytshalom.org](http://www.baytshalom.org)

Friday	August 5	7:30 pm	Shabbat Service with Rabbi Luna Followed by Welcome Oneg
Friday	August 12	7:30 pm	Shabbat Service
Friday	August 19	7:30 pm	Shabbat Service
Friday	August 26	7:30 pm	Shabbat Service followed by Oneg
Friday	August 12	7:30 pm	Shabbat Service
Friday	September 2	7:30 pm	Shabbat Service
Friday	September 9	7:30 pm	Shabbat Service
Friday	September 16	6:00 pm 6:30 pm 7:30 pm	Tot Shabbat Congregational Shabbat Dinner Family Shabbat Service
Saturday	September 23	7:30 pm	Shabbat Service

### HIGH HOLIDAY SCHEDULE

Wednesday	September 28	7:30 pm	Erev Rosh Hashanah
Thursday	September 29	9:30 am 6:00 pm	Rosh Hashanah Service Tashlich at Greenville Town Commons <i>Families welcome, bring bread crumbs to throw in river</i>
Friday	September 30 7:30 pm	9:30 am Shabbat Service	Rosh Hashanah Service Shabbat Service
Saturday	October 1	7:30 pm	Havdalah (location to be announced)
Friday	October 7	7:30 pm	Kol Nidre Erev Yom Kippur
Saturday	October 8	9:30 am 5:30 pm	Yom Kippur Service Yizkor Service Minchah/Ne'ilah Service followed by Break-Fast
Friday	October 14	6:30 pm 7:30 pm	Sukkot: Pizza in the Hut Shabbat Service
Thursday	October 20	(time to be determined)	Shemini Atzeret/Yizkor Service
Friday	October 21	7:30 pm	Simchat Torah Celebration
Friday	October 28	7:30 pm	Shabbat Service

# CBS Sisterhood Membership Form

(2011-2012)

The CBS Sisterhood represents women in the synagogue, its members and the

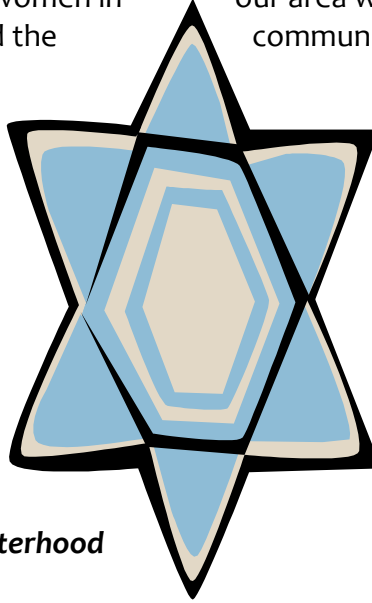
our area who are involved in supporting community.

We organize philanthropic religious events at CBS, and the religious school.

projects, sponsor social and provide financial support to

The Sisterhood offers us a venue to our community to help strengthen

socialize with each other and the bond that connects us.



## Great Reasons to become a CBS Sisterhood

## member:

- Meet new people attending Sisterhood socials, Ladies Night Out, Progressive Dinner Parties, and Book Club
- Attend museum and theater trips to Raleigh
- Organize and support fundraising events and much more!

We hope you will show your support and join Sisterhood today!

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Please return the bottom half of this form along with your dues of \$36 (tax- deductible) made payable to CBS Sisterhood by September 1<sup>st</sup>. Mail it to **Susanne Goldman, Treasurer at 2506 Surrey Lane, Greenville, NC 27858.**

Your Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email: \_\_\_\_\_

Yes, I would like to become more involved on the Sisterhood board. Please contact me.

Questions? Contact Karen Barondes 353-1797 or [Barondes5@earthlink.net](mailto:Barondes5@earthlink.net) or  
Susanne Goldman at 353-8840 or [Hayjayg1@earthlink.net](mailto:Hayjayg1@earthlink.net)

**CONGREGATION BAYT SHALOM  
ADDITIONAL CONTRIBUTIONS FORM**

**Memorial Plaque    \$200**

Deceased Full Name \_\_\_\_\_ \$ \_\_\_\_\_

Deceased Hebrew Name \_\_\_\_\_ Ben/Bat \_\_\_\_\_

**Inscribed Simcha Leaf**    \_\_\_\_\_ Large (\$108)    \_\_\_\_\_ Small (\$36)    \$ \_\_\_\_\_

Wording for plaque/leaf: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contribution in HONOR OF or MEMORY OF (circle one)**    \$ \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Rabbi's Discretionary Fund (RDF)** – The RDF is disbursed by the Rabbi to help members in need. The donors and recipients remain anonymous. Please write "Rabbi's Discretionary Fund" on the memo line of your check.

\$ \_\_\_\_\_

**Prayer Book Contribution (\$18 per book)**    \$ \_\_\_\_\_

**Other**    \$ \_\_\_\_\_

**TOTAL**    \$ \_\_\_\_\_

Donor Name and Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Person to whom acknowledgment of contribution should be made (except Rabbi's Discretionary Fund)

\_\_\_\_\_  
\_\_\_\_\_

**Make all checks payable to Congregation Bayt Shalom and mail it along with this form to:  
Congregation Bayt Shalom  
P.O. Box 2713  
Greenville, NC 27836  
Attn: Treasurer**