



Request for Annual Contribution Assistance

“Kol yisrael arevim zeh bazeh.” All of Israel are responsible for each other. (Talmud, Shavuot 39a)

At Congregation B’nai Israel, we strive to aid congregants who, because of financial hardship, are unable to pay the standard annual contribution and need special consideration. We see it as an obligation and a mitzvah — the fulfillment of a commandment — to enable anyone to join our congregation, regardless of financial circumstances. When you become part of our congregation community, it is also a responsibility and a mitzvah for each person to support our synagogue financially to the extent possible.

We understand that paying the full contribution might create a financial hardship in some circumstances. Situations that could merit special consideration include:

- Job loss
- Medical expenses
- Financial care of an extended family member

We are a self-funded community. Most of the costs to run our congregation are met through congregants’ contributions. Those in our community paying the standard amount and more enable us to provide limited contribution assistance for those in need.

Contribution Assistance will be granted by request only, according to synagogue procedures. We take confidentiality very seriously. The Contribution Assistance applicant’s identity will be known to the Financial Secretary and bookkeeper. Requests may also be reviewed by our Senior Rabbi and anonymously by a small Annual Contribution Assistance Committee.

Implementing this process fairly and effectively depends on everyone acting in accordance with Jewish values; prioritizing the short and long-term needs of the congregation; acting with integrity and honesty; and respecting everyone’s dignity and privacy. We will continue to respond in a fair and compassionate manner to those in our community who are experiencing true financial hardship that necessitates modifying their annual contribution agreement.

CONGREGATION B'NAI ISRAEL
ANNUAL CONTRIBUTION ASSISTANCE REQUEST FORM
July 1, 2025 – June 30, 2026

ALL INFORMATION WILL BE KEPT STRICTLY CONFIDENTIAL

HOUSEHOLD INFORMATION:

Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Cell Phone: _____ Home Phone: _____

E-mail Address: _____

Marital Status (circle one): Married Divorced Widow(er) Single
 Engaged Separated Partnered N/A

Have you previously requested financial aid? Yes _____ No _____

DEPENDENT INFORMATION:

Attends:

Religious School

Preschool

Number of Dependent Children _____

Receiving a member discount for Preschool Yes _____ No _____

Requesting Religious School Scholarship Yes _____ No _____

EMPLOYMENT INFORMATION:

How many adults are in your household _____

Total Household Yearly Income _____ Not split by person

PLEASE EXPLAIN THE REASON FOR YOUR REQUEST AND PROVIDE AS MUCH INFORMATION AS POSSIBLE:

PAYMENT PLEDGE

I/we confirm that I/we would like to be part of the CBI Community and I/we believe that due to our financial circumstances I/we currently require financial assistance from the members of the CBI Community,

I/We understand and appreciate that this financial assistance will be provided from other members of the CBI Community.

I/We also confirm that all of the information in this application is true

In accepting financial assistance, I/we will consistently make agreed upon payments and if unable to abide by the schedule or terms I/we will contact the Financial Secretary immediately.

The Financial Secretary will review this request and will respond as quickly as possible.

Thank you for your commitment and continued support of our community

Signed_____Date_____

Please return to: Congregation B'nai Israel, Financial Secretary, 2710 Park Avenue, Bridgeport, CT 06604

To be completed by the Financial Secretary
Contacted congregant or reviewed file on:
Approved 2025-2026 dues adjustment to:
Additional comments:
Signed by Financial Secretary: