



**AMERICAN CONFERENCE OF CANTORS
MEMBERSHIP DUES INVOICE 5785 (2024-2025)**

PAYABLE BETWEEN AUGUST 1 and OCTOBER 31. LATE FEES OF 10% ARE CHARGED NOVEMBER 1.

Members are subject to suspension if dues are not paid by **December 31**, unless prior arrangements are made with the Treasurer.

Name of Cantor: _____ **Phone:** _____

Congregation/Primary Employer: _____ **City/State:** _____

Position (check all that apply): Full-time Limited Service Part-time Rabbi Educator Administrator Chaplain
 Retired Emeritus/Emerita Other (please specify): _____

MEMBERSHIP DUES

Your Total Annual Compensation (Salary and Parsonage) \$ _____

See the ACC website for definitions of categories:

_____ **Regular Member (including non-pulpit cantorial work)** \$ _____

- 1.95%** of total salary and parsonage, for those earning \$150,000 and above
- 1.85%** of total salary and parsonage, for those earning from \$100,000-\$149,999
- 1.75%** of total salary and parsonage, for those earning from \$75,000-\$99,999
- 1.45%** of total salary and parsonage, for those earning from \$50,000-\$74,999
- 1.20%** of total salary and parsonage, for those earning up to \$49,999 (minimum dues \$110)

_____ **Associate Member** \$ _____
 0.825% of total salary and parsonage, **or \$350**, whichever is greater.

_____ **ACC/CA Dual Member** \$ _____
 \$275.00, if serving a conservative congregation **and** paying full CA dues
 (Please attach documentation)

_____ **Retired Member** Regular Associate) \$ _____
 \$82.50

_____ **Sustaining Member** \$ _____
 \$110.00

_____ **10% late fee** (if paid after October 31) + \$ _____

DUES REDUCTION FOR CCAR/ARJE/NATA/NAJC MEMBERS

If you are serving your congregation in primarily a role other than cantor, ACC dues may be reduced by the amount paid to an Affiliate Organization (listed below) but **may not be less than \$275. Please attach documentation of affiliate membership.** **Subtract** - \$ _____

Please check one: CCAR ARJE NATA NAJC International Clergy Organizations

TOTAL DUES: \$ _____

ENHANCED DUES: Your generosity ensures all cantors maintain membership and connection to the ACC.

_____ Mensch: \$180 + \$ _____
 _____ Super Mensch: \$360 + \$ _____
 _____ Ultra Mensch: \$720 + \$ _____
 _____ Donors Circle: \$1,800 + \$ _____

OTHER ADDITIONAL DONATIONS

_____ Friends of Transcontinental Music General Fund + \$ _____
 _____ Chesed Fund provides grants to support ACC members in need + \$ _____
 _____ ARZA Clergy Membership + \$ 50.00
 _____ Send me more information about the [GTM Organizational Membership](#) or [membership for my accompanist or myself](#).

TOTAL AMOUNT ENCLOSED: \$ _____

As a member of the ACC, I understand and acknowledge that it is my responsibility to read, understand and abide by, the ACC's governing documents including the new [Code of Ethics](#). All the ACC's governing documents may be found at www.accantors.org or by calling the ACC office. **Initial here:** _____

I will pay electronically and have visited the ACC Website to complete my payment

ACC Directory/Database Information

Please check here and fill out the form below if new personal/work contact information is being provided.

Title _____ First _____ Middle _____ Last _____

Personal Contact Information:

Home Address _____ City _____

State/Province _____ Zip/Post Code _____ Country _____

Home Phone _____ Cell Phone _____ Spouse: _____

Do you want your personal information to be published in our directory? Yes No

Primary Email Address _____

(This will be the email address used for all ACC correspondence)

Employment Information:

Work Status: Full time Part time Limited service In placement Unemployed Retired Emeritus/a
 Other _____

Employer Name _____

Congregation Affiliation (*if applicable*) URJ Other _____

Address _____ City _____

State/Province _____ Zip/Post Code _____ Country _____

Work Email _____

Phone _____ Ext. _____ Fax _____

Other Information:

School/Date Invested/Ordained _____ Date of ordination/certification _____

Other Titles You Hold (include school/date of ordination or degree award):

Rabbi _____

Doctor _____ Other _____

Please send all correspondence to my: Home address Work address

Please make all checks payable to: **AMERICAN CONFERENCE OF CANTORS**
1375 Remington Road, Suite M, Schaumburg, IL 60173-4844 • 847-781-7800

For participants in the ACC Retirement Plan only:

Do you want your contact information to be updated with Fidelity Investments? Yes No

For participants in any of the ACC Group Insurance Benefit plans:

Please contact Group Benefit Associates (GBA) directly with any change of address, contact information, salary or beneficiary update information at 800-450-1271 or via email, CustomerService@groupba.com.

For Office Use Only:

CW _____ WEB _____ DIR _____ CK#/CC _____ Other Notes _____