



Congregation of Reform Judaism Membership Pledge Form - 2016

Family Contact Information			
ADULT ONE	Last Name:	First Name:	Title: Mr. Ms. Mrs. Dr.
ADULT TWO	Last Name:	First Name:	Title: Mr. Ms. Mrs. Dr.
CHILDREN'S NAMES			
ADDRESS	CITY	STATE	ZIP
CELL PHONE	HOME PHONE	EMAIL	

Step 1: Select Your Membership Pledge Level

For a full explanation of each pledge category, see the reverse side of this form.
Please select one of the following Membership Pledge Levels:

Supporting Membership		Sustaining Membership	
<input type="checkbox"/> Standard Family	\$1,820	<input type="checkbox"/> Shomrim - Pillars	\$12,500 & above
<input type="checkbox"/> One Person Household	\$1,030	<input type="checkbox"/> Bonim - Builders	\$8,200
<input type="checkbox"/> Single Person* (21 - 29 yrs. old)	\$300	<input type="checkbox"/> Platinum	\$6,500
<input type="checkbox"/> Single Person* (30 - 33 yrs. old)	\$500	<input type="checkbox"/> Gold	\$4,500
<input type="checkbox"/> Young Family* (21 - 29 yrs. old)	\$500	<input type="checkbox"/> Silver	\$3,100
<input type="checkbox"/> Young Family* (30 - 33 yrs. old)	\$800	<input type="checkbox"/> Bronze	\$2,300
<input type="checkbox"/> Full Time Undergrad. Student (under age 24) & Active Duty Military Personnel (Please attach a copy of Student or Military ID)	Complimentary (does not include lifecycle events)	<input type="checkbox"/> If you do not wish your name acknowledged on Sustaining Membership recognition opportunities, please check this box & your pledge will be listed as "anonymous."	
*Building Fund, Security Assessment, and High Holiday Pledge will be waived these Membership levels		**Building Fund and High Holiday Pledge will be waived for all Sustaining Pledge Memberships**	

Pledge Assistance- financial hardship that prevent a member from paying full dues amount for the 2016 membership year will be reviewed on an individual basis by the Dues Committee
In order to obtain consideration level, please request a Pledge Assistance Form by calling the Executive Director, Michael Kancher, mkancher@crjorlando.org or 407-645-0444.

** IN ADDITION TO completing a Pledge Relief Form, please attach any supporting documentation or information that may be of help to the Dues Committee in making a decision regarding total dues credit awarded. All financial information provided remains strictly confidential & is only reviewed by a member of the Dues Committee.

Step 2: Calculate Your Pledge Amount Total – Please note pre-printed amounts are NOT optional.

Membership Pledge – Please enter amount corresponding to above selection	\$	
Building Fund – Please see the reverse side for a complete explanation (If you have already completed your commitment, please disregard this amount) \$300 per year for five years for a total of \$1,500.	\$	300
Security Assessment - Please see reverse side for a complete explanation	\$	100
Total Pledge Amount—please total ALL amounts at right, including ALL the pre-printed amounts.	\$	
ARZA – Explanation on reverse – Family Membership \$36 – Separate check enclosed		<input type="checkbox"/>

Step 3: Select Your Payment Method & Payment Frequency

Payment Method – Choose one	Payment Frequency – Choose one
<input type="checkbox"/> Electric Funds Transfer (See form)	<input type="checkbox"/> Monthly 15 th _____ 30 th _____
<input type="checkbox"/> Credit Card (Please fill out authorization section below)	<input type="checkbox"/> Quarterly
<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express	<input type="checkbox"/> Post-dated checks – 10 months
<input type="checkbox"/> Discover	
<div>□□□□ □□□□□□□□ □□□□□□</div> <div>□□/□□ Card number & expiration date:</div>	
Signature / Date	

Thank you for your continued support.