



The Jewish Center of the Hamptons
Rabbi Sheldon Zimmerman
Cantor Debra Stein

MEMBERSHIP APPLICATION

Membership dues support only a portion of the many services and programs offered by the Jewish Center of the Hamptons. We have several categories of membership dues to enable people to give according to their financial capability. New members are also asked to contribute to the Capital Improvement Fund to maintain our facilities. Nobody will be denied membership in our congregation due to financial hardship. Please speak with Rabbi Zimmerman or Cantor Stein, confidentially, to make alternative arrangements for Jewish Center dues.

MEMBERSHIP CATEGORIES

- | | |
|---|----------------------------------|
| _____ \$25,000 President's Gold Circle Membership | _____ \$ 2,750 Chai Membership |
| _____ \$10,000 Sustainer's Silver Membership | _____ \$ 1,950 Family Membership |
| _____ \$ 5,000 Kavod (Honor) Membership | _____ \$ 995 Single Membership |
| _____ \$ 3,600 Double Chai Membership | |

ALL MEMBERSHIP CATEGORIES INCLUDE HIGH HOLIDAY TICKETS

CAPITAL IMPROVEMENT FUND (one-time assessment that can be paid in three annual installments)

- | | |
|---|---|
| _____ \$ 1,800 Family (\$600 per installment) | _____ \$ 900 Single (\$300 per installment) |
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NEW! Introductory memberships (Memorial Day weekend to Labor Day) for those who have never been JCOH members: Family membership - \$550, Individual membership - \$275

Name (1) _____ **Name (2)** _____

Children: _____

Permanent Address _____ City _____ State _____ Zip _____

Local Address _____ City _____ State _____ Zip _____

Daytime Phone _____ Evening phone _____ Local phone _____

Cell _____ Email _____

Enclosed is my check for \$ _____ Membership Dues, Category: _____

(Please make payable to The Jewish Center of the Hamptons) **OR** Please charge my

MC/Visa/Amex Card # _____ Exp date: _____

Credit Card Zip Code: _____ Signed: _____ Date: _____

Payment plans are available. Please contact Rabbi Zimmerman or Cantor Stein in the office for details.

Please check activities in which you would like to participate:

- | | | |
|-------------------------|--------------------------------|-----------------|
| ___ Adult B'nai Mitzvah | ___ Family Programs | ___ Summer Camp |
| ___ Adult Education | ___ Outreach to Mixed Marrieds | ___ Youth Group |
| ___ Cultural Programs | ___ Religious School | ___ Other _____ |

To support the programs and community services of The Jewish Center of the Hamptons, I would like to make the following **additional** contribution:

Check enclosed for \$ _____ made payable to the Jewish Center of the Hamptons **OR** please charge my

MC/Visa /AmEx Card # _____ Exp date: _____

Credit Card Zip Code: _____ Signed: _____ Date: _____

Thank you for your support. Please mail or deliver this application with payment to the Jewish Center office.