**Families and Singles** 

Young Adults and

Seniors on a Limited Income



## TO THE BOARD OF TRUSTEES:

Signature:

**Benefactors** 

I/we agree to abide by the financial policies of Temple Beth Shalom and such regulations as approved by its board of trustees. The temple's financial policy states that dues are due in full on July 1, 2024, and that the board may authorize installment payments when necessary. I/we understand that the option to pay dues in installments is an accommodation and selection of the installment option does not relieve me/us of the obligation to pay my/our full dues pledge.

	Ner Tamid	Chai	Shalom	Sustaining	Good Faith	\$1,000	
	\$5,500	\$4,500	\$3,900	\$2,500	\$1,800	φ1,000	
In ac	cordance with	this schedule, n	ny/our 2024-20	25 dues commi	tment shall be	: \$	
Security Fee (\$150 required):						<b>\$</b> <u>150</u>	
Additional Donation to Security Fund:						\$	
Men's Club (\$36):						\$	
Sisterhood (\$36 general or \$54 Miriam level):						\$	
					Total:	\$	
	Photos may be	used on the tem	ple's website, so	cial media, or in	the temple's we	ekly email: Yes □ No □	
Print F	Full Name:		Phone:				
Signat	ignature:Email:						
Septe paid i	mber 15, 2024, i n full by April 3	n order to obtain				ommitment must be paid by s and payments must be	
CHECKS:						Make checks payable to Temple Beth Shalom	
☐ Enclosed is a check for \$ as <b>payment in full</b> for 2024-2025.							
				Please bill ant paid by April 3			
CREDIT CARD: There is a 3% transaction fee for all credit card charges.						We accept American	
☐ Please charge my credit card for <b>dues in full</b> .						Express, Visa, MasterCard and Discover	
□ Ple	ease charge my ci	redit card <b>for due</b>	s in installments	s# of mo	onthly payments	(maximum of 9).	
Card#	<b>#</b> :			Exp Date:	Se	curity Code:	
Name	e (as it appears or	n credit card):				-	
Addr	ess:						
						ode:	