

הבורה HAVURAH

THE ADDISON COUNTY JEWISH CONGREGATION

Membership/Renewal Form 2018-2019

This information will be used to update Havurah's database and membership directory.*

New Member Renewing Member

Adult 1 _____

Preferred Phone #:

Work Home Cell _____

Email _____

Adult 2 _____

Preferred Phone #:

Work Home Cell _____

Email _____

Address _____

City, State, Zip _____

Children & Birthdays (m/d/yr) _____

Payments may be scheduled on a semi-annual or quarterly basis, although we encourage payment in full to strengthen our cash flow. If dues represent a hardship for you, please contact Havurah Treasurer, Matt Utterback (Matt@spinkscorners.com or 617-909-9133). **Cost is not prohibitive at Havurah.** Please indicate your payment schedule below:

Payment in full Semi-Annual Basis Quarterly Basis

Dues amount (circle one): Family: \$575 Single: \$265

Dues: \$ _____

Capital Campaign: \$ _____ (tax deductible)

Hebrew School Tuition: \$ _____ (\$630 for first child; \$370 each additional child;

Plus volunteer component)

Support Youth Program \$ _____

Total enclosed: \$ _____

Please return this form, together with your payment to:

Havurah, Attn: Treasurer
PO Box 823
Middlebury, VT 05753

Thank you!

*The membership directory is available only to Havurah members. Please indicate below if there is any information you do not want printed in the directory or you have any special requests for addressing of mail and email.