



# Congregation Beth David

## MEMBERSHIP APPLICATION

2023-2024 (5784)

Membership dues payable by September 7, 2023

\* - REQUIRED

Tick the RED BOX to exclude from member directory ↓

### NAME(S):

1) Title \_\_\_\_\_ First\* \_\_\_\_\_ Middle \_\_\_\_\_ Last\* \_\_\_\_\_

Email\* \_\_\_\_\_  Tel. Number\* \_\_\_\_\_

2) Title \_\_\_\_\_ First\* \_\_\_\_\_ Middle \_\_\_\_\_ Last\* \_\_\_\_\_

Email\* \_\_\_\_\_  Tel. Number\* \_\_\_\_\_

DEPENDENT(S) (Note: Dependents will NOT be listed in the member directory.):

1) \_\_\_\_\_ 2) \_\_\_\_\_

3) \_\_\_\_\_ 4) \_\_\_\_\_

### YEAR-ROUND MAILING ADDRESS:\*

Street/Apt/PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### LOCAL ADDRESS (if different from year-round mailing address):

Street/Apt/PO Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Membership Dues\*: \$ \_\_\_\_\_

Additional Mitzvah Donations: \$ \_\_\_\_\_

**TOTAL PAYMENT DUE:** \$ \_\_\_\_\_

PAYMENT METHOD:\* PayPal  Check

### Types of Memberships

Single	\$550/year
Family**	\$900/year
Sustaining**	\$1,200/year

\*\* For member + all dependents

Please mail completed application (with check) to **Congregation Beth David, PO Box 125, Amenia, NY 12501**; alternatively, scan and email application to [info@congbethdavid.org](mailto:info@congbethdavid.org), and mail check separately. ***If PayPal is the payment method, please do not forget to make the payment.***