

## JEWISH COMMUNITY CENTER OF LONG BEACH ISLAND

## 2411 Long Beach Blvd., Spray Beach, NJ 08008

(609) 492-4090 • www.jccoflbi.org • jccoflbi@gmail.com • fax (609) 492-7550

## **2022 MEMBERSHIP RENEWAL INFORMATION**

ENCLOSED IS:		\$500 Single Membership \$250 \$50 Security Fee \$25
	Member 1	Member 2
Mr. Mrs. Ms. l	Dr.:	Mrs. Ms. Dr.:
E-Mail:		E-Mail:
Cell Phone:		Cell Phone:
Birthday:		Birthday:
Anniversary:		
Primary Addres	S: Check if year round mailing address	d Secondary Address:
State, Zip:		State, Zip:
Phone:		Phone:
I DO NOT W	ISH TO BE INCLUDE	ED IN THE MEMBERSHIP DIRECTORY
Bulletin.	ed in placing a black and ssue or \$100 for all 5 i	nd white business card size ad for my BUSINESS in the
Directory.	ed in placing a black an (Please circle) GE: \$60.00 HALF PA	nd white ad for my BUSINESS in the Membership GE: \$30.00
	should be made out t	or jccoflbi@gmail.com), and provide a business card or to the JCC of LBI and mailed to 2411 Long Beach
	can view it on-line ple	at <a href="www.jccoflbi.org">www.jccoflbi.org</a> , and will only be mailed if ease don't request a mail copy, and help us save the cost
Sorry, I still n	eed to receive a printed	d copy.

YOUR NAME(S)				
YAHRZEIT INFORMA	ATION:			
The JCC of LBI ser addition these name			•	zeits. In
Please be aware tha Yahrzeit notices, no need help with the o presiding Rabbi for	or can we have the late you can usual	name read during	g the appropriate se	ervice. If you
If you wish to honor remembrance is three the name and yahrze the Shabbat of the warring the year who	rough a Memorial zeit date, is mount week of the yahrze	Plaque and Lamped on the bronze tit, on the day of the	<ul> <li>Each memorial p ablet in the Sanctuane ne yahrzeit and on t</li> </ul>	laque, bearing ary. It is lit on the four festivals
MEMBER 1 YA	HRZEIT(S)			
NAME OF DECEASED	HEBREW NAME	RELATIONSHIP TO MEMBER	DATE OF DEATH (ENGLISH DATE) (M/D/Y)	BEFORE or AFTER SUN-DOWN
		_		□Before
				□After
				□Before
				□After
				□Before
				□After
				□Before
				□After
				□Before
				□After
MEMBER 2 YA	HRZEIT(S)			
NAME OF DECEASED	HEBREW NAME	RELATIONSHIP TO MEMBER	DATE OF DEATH (ENGLISH DATE) (M/D/Y)	BEFORE or AFTER SUN-DOWN
				□Before
				□After
				□Before
				□After
				□Before
				□After
				□Before
				□After
				□Before
				□After

Please use other side for additional names and dates.

RETURN THIS 2 PAGE APPLICATION WITH YOUR CHECK TO: JCC OF LBI, 2411 LONG BEACH BLVD., SPRAY BEACH, NJ 08008