



### Financial Agreement 2019-2020

Membership covers timeframe from now through **August 31, 2020**.  
Membership includes ticket for the High Holy Days of Sept-Oct, 2019 per Paid Member.

**I. Membership** (Choose one option)

<input type="checkbox"/> Single Person	1 Adult, no children	\$ 500.00	
<input type="checkbox"/> Single Parent Plus	1 Adult, with children	\$ 525.00	
<input type="checkbox"/> Couple	2 Adults, no children	\$ 1000.00	
<input type="checkbox"/> Family	2 Adults, with children	\$ 1050.00	
<input type="checkbox"/> Young Family	2 Adults (< age 40), with children	\$ 700.00	

**TOTAL MEMBERSHIP DUES (from above)** \$ \_\_\_\_\_

**II. Bar/Bat Mitzvah**

Bar/Bat Mitzvah Fee per Child....(#)\_\_\_ x \$ 300.00 \$ \_\_\_\_\_

**III. Prayer Book Donation** per Book....(#)\_\_\_ x \$ 36.00 \$ \_\_\_\_\_

**Chair Donation** per Chair....(#)\_\_\_ x \$ 72.00 \$ \_\_\_\_\_

(Please print appropriate wording for Prayer Book Label or Chair Plaque below)

IN HONOR OF (or) IN MEMORY OF (please circle choice)

**Total Due** (sum of sections I + II + III above) \$ \_\_\_\_\_

**Payment Options** (Choose one option)

- One full payment submitted with this agreement
- Deposit one half of dues, then balance due on 1<sup>st</sup> day of month 6 months after Agreement Date
- Deposit one qtr of dues, then balance due in 3 equal payments on 1<sup>st</sup> day of month every 3 months
- Deposit \$100.00 per adult, then balance due in monthly equal payments on 1<sup>st</sup> day of each month

Credit Card Payments are available on our website, secured through PayPal.

**Note: All Credit Card Payments will incur additional 5% surcharge to cover fees.**

**Any payments made after the 15th of the month due will incur a \$25.00 late fee.**

**All payments for current fiscal year must be received no later than August 31, 2020.**

**\* Discount: \$25 Discount per Adult if Total Membership Dues are paid in full by April 30, 2019.**

Less Deposit (or applicable Discount) < \$ \_\_\_\_\_ >

**Balance Due** \$ \_\_\_\_\_

**Financial Agreement Authorized By:** \_\_\_\_\_

**SIGNATURE of Member(s) REQUIRED**

**Dated:** \_\_\_\_\_

### Congregation L'Dor Va-Dor

9804 S. Military Trail, Suite E 2-4 · Boynton Beach , Florida 33436 · (561) 968-0688

www.LDORVADOR.org · Email: Info@LDORVADOR.org · Like us on Facebook



**Membership Form 2019-2020**

**Date** \_\_\_\_\_

Last Name(1) \_\_\_\_\_ First Name \_\_\_\_\_ Birthday \_\_\_\_\_

Last Name(2) \_\_\_\_\_ First Name \_\_\_\_\_ Birthday \_\_\_\_\_

Occupation(s) \_\_\_\_\_ Anniversary \_\_\_\_\_

Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone(1) \_\_\_\_\_ Work Phone(1) \_\_\_\_\_

Cell Phone(2) \_\_\_\_\_ Work Phone(2) \_\_\_\_\_

Email Addr(1) \_\_\_\_\_ Email Addr(2) \_\_\_\_\_

***How did you hear about us?*** CIRCLE 1: Family/Friend/Rabbi/Website/Advertising/Flyer/Postcard/ \_\_\_\_\_

- To OPT OUT of Congregation Email communications, please check box to left.
- To OPT OUT of inclusion on L'Dor Va-Dor Directory for Members only, please check box to left.

**Yahrzeits (please provide *English* Month and Day; you will receive notification for each):**

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Date of Death \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Date of Death \_\_\_\_\_

**Children (List ONLY for Family Memberships):**

Name \_\_\_\_\_ Birthday \_\_\_\_\_

Name \_\_\_\_\_ Birthday \_\_\_\_\_

Name \_\_\_\_\_ Birthday \_\_\_\_\_

Name \_\_\_\_\_ Birthday \_\_\_\_\_

**Interest for Volunteering/Committees to join:**  Membership  Sunshine  Fundraising

Ritual  Program Planning  Religious Education  High Holy Days  Financial

Oneg  Sisterhood  Men's Club  Gift Shop  Social Action  Communication

Social Media  Marketing  Grant Writing  Bylaws  Other Education

Other \_\_\_\_\_

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