## LAKE CHAPALA JEWISH CONGREGATION SEPTEMBER 2020-AUGUST 2021 MEMBERSHIP ENROLLMENT FORM

## Annual Dues: \$6000 Pesos PER PERSON

Make checks payable to Lake Chapala Jewish Congregation, A.C.

Name(s)*:			
I/We Pledge*: \$		pesos.	
Please select payment below*:			
One (1) payment of \$6000 Pesos per perso	on due Sept 2,	2020	
Two (2) payments of \$3000 Pesos per person Payment 1 due September 2, 2020		lue December 31, 2020	
Local Address*:			
Telephone*:	Home	Cell	
E-mail(s)*:			
Emergency Contact:	E	mergency. Phone:	
Eligibility for membership (check one)*:			
1. Jewish through matrilineal or patrilineal descent.			
$\Box$ 2. Jewish by choice (conversion)			
□ 3. Spouse or partner of a Jewish member			
4. Parent or guardian of a Jewish child			
$\Box$ 5. Actively committed or exploring the p	rocess of conv	ersion to Judaism	
Member Date of Birth (MM/DD):	(to be av	vailable to members only	/)
Wedding Anniversary Date (MM/DD):			
Yahrzeits to be remembered:			
Name		Relationship	Date

No one will be denied membership based on inability to pay the full membership amount. Please contact Betty Shiffman <u>shiffmanky@gmail.com</u> or Robin Hayden <u>hayden365@yahoo.com</u> for confidential arrangements.