Temple Beth Abraham <u>Membership Dues Pledge Form</u> July 2023/5783 - June 2024/5784



Return to 336 Euclid Ave, Oakland, CA 94610 Bookkeeper@TBAoakland.org

Name:	
Address:	
	Cell Phone:
E-mail:	
Amount Pledged (check	c one):
☐Basic Dues \$2,952	
☐ Basic Senior Dues	\$1,000 for those in need
☐I/We would like to p	oledge annual dues of \$
Payment Plan (check or	ne):
□Annual-one paymer	nt of \$2,952 paid by December.
□Semi-Annual -Two _l	payments of \$1,476 July and December.
□Quarterly-Four payr	ments of \$736 paid in July, October, January and April.
□Monthly-paid by the	e 15 th of the month at \$246.
	raged and can be arranged via credit card or automatic check se Automatic Payment Election Form enclosed.
☐ I wish to include 3% to offset the cost of payment.	
□ Dues Relief Form (check or	nly if requesting and fill out the Dues Relief Form enclosed)
If you are in a financial situation the attached Membership Due	not refuse membership to anyone because of an inability to pay. on where special accommodations are necessary, please fill out es Relief Form and return it to the synagogue office. If you have easurer, Peter Miller, or the Director of Finance, Paolo Gomez.
Member Signature:	