

NAME(S): _____

For Office Use Only: Tickets _____

Date _____

MEMBERSHIP DUES AND TICKETS

PLEASE FILL IN YOUR CHOICES AND RETURN THIS FORM WITH YOUR PAYMENT
BY AUGUST 4, 2010

PLEASE CIRCLE ONLY ONE SERVICE OPTION (EARLY OR LATE)

EARLY

LATE

Membership 7/1/10 - 6/30/11			Total
Single-person Household	\$	925.00	
Multi-person Household	\$	1850.00	
Seats			
		# seats	
Members and Immediate Family	\$	136.00	
Member Guest	\$	200.00	
Non- Member	\$	300.00	
Yizkor Listing			
		# listings	
Suggested donation per listing	\$	18.00	
Total Payment Enclosed			

YOU MAY PAY BY CHECK OR CREDIT CARD.

Please make checks payable to TBZ, and mail to 1566 Beacon Street Brookline, MA 02446.

To pay by credit card (**MasterCard or Visa only**), complete the section below and mail this form to the synagogue office. You can also call the office, 617-566-8171 X14, with this information.

Cardholder's name: _____

Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-Mail: _____

Credit Card #: _____ Exp: _____

Amount: _____

I agree to have TBZ add 3% to the above amount to recover the fees for using a credit card Yes No