

Annual Membership – New Member Payment Form

Malibu Jewish Center & Synagogue



Name: _____

Membership Fee	\$ _____
Security Assessment	\$360.00 _____
Health & Safety Fee	\$180.00 _____
Religious School Tuition	\$ _____
Rabbi's Discretionary Fund [optional]	\$250.00 _____
Cantor's Discretionary Fund [optional]	\$250.00 _____
Religious School Scholarship Fund [optional]	\$250.00 _____
Sisterhood Membership Fee [optional]	\$36.00 _____
Men's Club Membership Fee [optional]	\$36.00 _____
TOTAL	_____

Your invoice may be paid:

- By credit card, using this form
- By check, in enclosed envelope
- Online at MJCS.org
- By phone (310) 456-2178
- By fax (310) 456-6578
- By email at
Accounting@mjcs.org

We are happy to accept credit card payments. However, please consider sending a check instead to save us the fees associated with credit card transactions.

Membership Dues - Payment Options – Credit Card

___ Pay in Full: Charge my credit card the total due of \$ _____
___ 2 Installments: 50% Today = \$ _____ and 50% \$ _____ on 12/15/2020
___ 3 Installments: 40% Today = \$ _____ 30% \$ _____ on 10/15/2020
30% \$ _____ on 12/15/2020

Payment

- Enclosed is my check in the amount of \$ _____ payable to MJCS
 Charge my credit card VISA MASTERCARD American Express

CC Number: _____

Expiration Date: _____ Security Code: _____

Name on Card: _____

Billing Address: _____

Phone number: _____ Email _____

Signature: _____