



2013 - 2014 MEMBERSHIP OPTIONS

SINGLE MEMBERSHIPS

GENERAL - \$ 594

Includes 1 Adult High Holiday Ticket

DONOR - \$ 882

GENERAL MEMBERSHIP PLUS...

- ✦ Scholarship Assistance for Student or Adult TAO Membership (\$342 Value)

MITZVAH - \$ 1,062

DONOR MEMBERSHIP PLUS...

- ✦ \$360 High Holy Day Pledge
- ✦ 2 Heart to Heart Messages (\$36 Value)
- ✦ "Mitzvah/Neshama Only" Brunch (or other private event) for one with Rabbi Marc (\$100 Value)

NESHAMA - \$ 1,800 CHAI

MITZVAH MEMBERSHIP PLUS...

- ✦ 4 Heart to Heart Messages (\$72 Value)
- ✦ "Mitzvah/Neshama Only" Brunch (or other private event) for two with Rabbi Marc (\$200 Value)
- ✦ 1 ticket to Annual Gala (\$100 Value)
- ✦ One Oneg Shabbat Sponsorship (\$360 Value)

FAMILY MEMBERSHIPS

GENERAL - \$ 1,122

Includes 2 Adults & 2 Children (under 18 years of age) High Holiday Tickets

DONOR - \$ 1,494

GENERAL FAMILY MEMBERSHIP PLUS.

- ✦ Scholarship Assistance for Student or Family TAO Membership (\$474 Value)

MITZVAH - \$ 1,800 CHAI

DONOR MEMBERSHIP PLUS...

- ✦ \$360 High Holy Day Pledge
- ✦ 2 Heart to Heart Messages (\$36 Value)
- ✦ "Mitzvah/Neshama Only" Brunch (or other private event) for two with Rabbi Marc (\$200 Value)

NESHAMA - \$ 3,600 DOUBLE CHAI

MITZVAH MEMBERSHIP PLUS...

- ✦ 4 Heart to Heart Messages (\$72 Value)
- ✦ "Mitzvah/Neshama Only" Brunch (or other private event) for four with Rabbi Marc (\$400 Value)
- ✦ 2 tickets to Annual Gala (\$200 Value)
- ✦ One Oneg Shabbat Sponsorship (\$360 Value)
- ✦ One Month Newsletter Sponsorship (\$486 Value)



TAO - The South Florida Center for Jewish Renewal

Temple Adath Or - Warm, Meaningful, Joyful Judaism. Welcome Home.

2013 – 2014 MEMBERSHIP APPLICATION & RENEWAL UPDATE

Contact Information

Please fill out the following information completely so we may update our computer records.

Primary Name: _____ Birth Date: ____/____/____ Occupation: _____
 Address: _____ City: _____ State: ____ Zip: _____
 Home Phone: (____) _____ Cell: (____) _____ Work: (____) _____
 E-mail: _____
 Name (Spouse): _____ Birth Date: ____/____/____ Occupation: _____
 Home Phone: (____) _____ Cell: (____) _____ Work: (____) _____
 E-mail: _____ Wedding Anniversary: ____/____/____

May we text your cell phone with last minute updates or schedule changes? Yes ___ No ___

May we list your home address and home telephone number in a TAO directory? Yes ___ No ___ Cell#? Yes ___ No ___

Family Background

Child's Name: _____ Birth Date: ____/____/____
 Child's Name: _____ Birth Date: ____/____/____
 Child's Name: _____ Birth Date: ____/____/____

We will honor your family's Yahrts. Please tell us:

Name: _____ Relationship: _____ Date of Death: ____/____/____ Before After Sundown
 Name: _____ Relationship: _____ Date of Death: ____/____/____ Before After Sundown
 Name: _____ Relationship: _____ Date of Death: ____/____/____ Before After Sundown
 Name: _____ Relationship: _____ Date of Death: ____/____/____ Before After Sundown

Community Involvement

I (We) wish to be active and to bond with the TAO Community and are willing to participate.

(Please list your interests e.g. choral group, Women's or Men's Spirituality Group, Hebrew Class, Chorus, Wisdom Class, etc.)

Name: _____ Area of specialty or interest: _____
 Name: _____ Area of specialty or interest: _____

I would be happy to help out in: Office Telephone from home Shabbat Service Other _____
 Who can we thank for bringing you to TAO? _____

Membership & Sponsorship

Please indicate your level of membership on the attached form. If financially able, please contribute at the higher level.

Contribution Details

(Payment in full is preferred when possible)

I am enclosing a Check for \$ _____ and the Check number is _____
 Please charge my credit card: Visa MasterCard American Express Discover in this amount \$ _____

Your name as it appears on card: _____

Your Billing Address (If different than home): _____

Card # _____ - _____ - _____ - _____ Exp. Date: ____/____/20____ Code : _____

A minimum of \$140 per member is required to receive High Holy Day tickets.

Please indicate how you choose to cover the remaining balance on your credit card... in equal installments:

Monthly Quarterly Semi-Annually

I authorize charges to my card as indicated above.

I agree my pictures may be used for TAO publication in newsletters, website, etc.

Signature: _____ (Required for Credit Card Billing) Today's Date: ____/____/20____

Thank you for joining our spiritual family. We look forward to sharing meaningful experiences with you.