

OHALAH MEMBER PAYMENT AND ALEPH DONATION FORM

Please use this form to:

- pay OHALAH dues for 2008 - if you are already an OHALAH member.
- make a donation to OHALAH - We welcome your donation regardless of whether you are a member.
- make a donation to ALEPH - ALEPH welcomes your donation regardless of whether you are a member.
- make a chai donation

ALEPH CHAI DONATIONS – Rabbis, cantors and rabbinic pastors who have been ordained by Reb Zalman or through B’nai Or or P’nai Or Religious Religious Fellowship or through ALEPH are asked to make a contribution of at least \$216 each year to help sustain our wonderful training programs. Those who are able to contribute larger sums are most welcome to do so. Those not ordained in these programs are also invited to support the ALEPH professional training programs. ALEPH appreciates your support!!!

OHALAH DUES

<u>If your annual income is:</u>	<u>Please pay these dues:</u>
\$101,000 and up	\$216
\$66,000 to \$100,000	\$162
\$36,000 to \$65,000	\$108
\$35,000 and under	\$54

PLEASE NOTE: THIS FORM MAY NOT BE USED TO APPLY FOR MEMBERSHIP IN OHALAH OR ALEPH. Applications for OHALAH membership may be downloaded on the OHALAH website at www.ohalah.org.

PLEASE PRINT LEGIBLY

Name _____

In what capacity are you a member of OHALAH (rabbi, cantor, rabbinic student, cantorial student)

Amount of OHALAH dues for 2008 \$ _____
(If you have not yet paid OHALAH dues for 2007, include a separate check and write “2007 dues” on the memo line. Thank you!)

Amount of donation to OHALAH \$ _____

Amount of donation to ALEPH \$ _____

Total enclosed \$ _____

Total charged to my credit card \$ _____

IN ORDER TO PAY BY CREDIT CARD, YOU MUST FILL OUT THE FORM ON THE NEXT PAGE.

**PLEASE MAKE YOUR CHECK PAYABLE TO OHALAH
or fill out the credit card form on the next page. Mail your application and payment to
Judy Dawson, OHALAH, P. O. Box 48, Boulder, CO 80306-0048. Thank you!!!**

**To pay by Visa or MasterCard, please fill out the form below
in addition to filling out the application on the previous pages.**

Please print legibly.

Your name as you are known in OHALAH/ALEPH: _____

Your name as it appears on your credit card: _____

Your credit card billing address, including city, state and zip code: _____

Daytime phone no.: _____, Evening phone no: _____

Email address: _____

Circle the card you are using: Visa MasterCard

Card no.: _____ Expiration Date: _____

Please bill \$_____ to my credit card as soon as this form is received. All conference costs must be paid with your registration. Applicants for financial aid should submit a check for \$100.

Please bill \$_____ to my credit card for OHALAH dues or my donation to ALEPH each month for the next twelve months. The total amount I am authorizing to be deducted over twelve months is \$_____.

Please submit this page together with the previous pages completed as appropriate. We cannot process a credit card payment request without the conference application or the Ohalah membership payment form or both. Thank you!

Date: _____ Signature: _____

Your credit card bill will show a payment to "ALEPH" for all of the above charges.

**Please make your check or money order payable to OHALAH,
or fill out the credit card form above,
and mail it with your application to
Judy Dawson, OHALAH, P. O. Box 48, Boulder, CO 80306-0048.
Thank you!!!**