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## **MEMBERSHIP**

# Shalom and Welcome!

Dear Prospective Member of the JCSVV Synagogue,

Thank you for considering membership in the Jewish Community of Sedona and the Verde Valley (JCSVV) for the **July 1, 2024 to June 30, 2025/ 5785** membership year.

We offer a variety of enriching services and programs both online and in person, such as Shabbat Services and holiday programs.

### **Here is a summary of what our Synagogue provides:**

- Religious Services including Erev Shabbat, High Holy Days, and midweek Morning Minyan
- Torah Study and other religious educational programming
- A wealth of cultural and social programs and services
- Bikkur Cholim visits to ill members
- Outreach programs to help those less fortunate in the community
- Opportunities to plan and implement governance and programming

Our Synagogue offers three types of memberships, indicated below. Membership costs and payment options are detailed on the enclosed Membership Dues Form.

### **FAMILY MEMBERSHIP**

- Religious Services including High Holy Days, and Holiday Events
- Voting rights for two members
- Member pricing for our enriching, inspiring, religious, and cultural events
- Committee and Board participation

### **INDIVIDUAL MEMBERSHIP**

- Religious Services including High Holy Days, and Holiday Events
- Voting rights
- Member pricing for our enriching, inspiring, religious, and cultural events
- Committee and Board participation

**ASSOCIATE MEMBERSHIP is available to an individual or family living outside the Verde Valley or who is a member of another congregation who wishes to support the JCSVV.**

- Religious Services and Holiday Events
- Member pricing for our enriching, inspiring, religious, and cultural events
- Committee participation
- Associate Membership does not include High Holy Day tickets. If you are a member in good standing at another synagogue that includes the cost of High Holy Day seats in its dues, you may contact the JCSVV office for reciprocity information.

**PRO-RATED MEMBERSHIP:**

- If you become a new Family or Individual Member in the middle of the membership term, your dues may be pro-rated for this membership year.

We invite you to one of our Services or events to experience for yourself our friendly and welcoming congregation. Please visit our website, <http://www.jcsvv.org> for detailed information about our Synagogue and browse through our calendar of upcoming activities.

**If you are interested in becoming a member, you may:**

1. Submit an online fillable membership form by going to [www.jcsvv.org](http://www.jcsvv.org); or
2. Download a PDF application and return by mail to: JCSVV, PO Box 13, Sedona, AZ 86339; or
3. Contact the JCSVV office at (928) 204-1286 or [office@jcsvv.org](mailto:office@jcsvv.org) with any questions, or to request that a membership form be mailed to you.

Your support of our community is a demonstration of your commitment to Judaism and its traditions, and recognition of the significance of our presence in Sedona. Your participation through membership in our congregation is valued and essential to the future of the JCSVV.

Thank you for considering joining our warm and welcoming congregation.

Shalom,

**Sybil Malinowski Melody**  
President

**Alicia Magal**  
Rabbi

**Gloria Brown**  
V.P. of Membership

**ANNUAL MEMBERSHIP FEES for Fiscal Year 2024-2025:**

**Annual Family Membership:           \$ 1,988**

**Annual Individual Membership:       \$ 994**

**Annual Associate Membership: \$500 for 2 people, \$450 for 1 person**

Please consider Tzedakah membership levels listed on the membership form as an additional support to the JCSVV.

In response to the horrible events of October 7th, the JCSVV has increased physical security for most Services and events. To cover the costs for additional security there is an optional \$100 assessment per member for Synagogue Security. If you are able to pay an additional amount to help cover the increased cost for Synagogue Security, we thank you.

Please be assured that no one will be denied membership in the JCSVV for financial reasons. Every family or individual who desires to be a member of our community is valued and important.

Anyone who wishes to become a member is encouraged to join the JCSVV. If your situation requires a dues adjustment different from the amount stated, please contact President Sybil Malinowski Melody at [jcsvvpresident@jcsvv.org](mailto:jcsvvpresident@jcsvv.org) or call the Office at 928.204.1286.

\*All communications are confidential.



## JCSVV NEW MEMBERSHIP APPLICATION July 1, 2024 – June 30, 2025

### Membership Type: Family

**Member # 1**       Mr.       Ms.       Mrs.       Dr.      Other \_\_\_\_\_

Marital Status:      Single:       Married/Partner:       Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Nickname \_\_\_\_\_

Gender:       Male       Female

Religious background:       Jewish       Other

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

### Residence Address

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

### Mailing Address (if different from residence)

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

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**Member # 2**       Mr.       Ms.       Mrs.       Dr.      Other \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Nickname \_\_\_\_\_

Gender:       Male       Female      Birthdate \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Religious background:       Jewish       Other

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

### Residence Address (if different from first family member listed above)

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

### Mailing Address (if different from residence)

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_



**JCSVV MEMBERSHIP DIRECTORY**

Members' contact information (name, address, phone number, email) is published in the JCSVV Membership Directory. This information is ONLY distributed to JCSVV members.

Do you agree to have your information published in our Directory?     YES     NO

Please inform the JCSVV Office of any changes to your phone numbers, address or email.

**EMERGENCY NOTIFICATION**

**Please provide the following information for our records:**

Notify \_\_\_\_\_ Relationship: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Notify \_\_\_\_\_ Relationship: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

*Jewish Community of Sedona and the Verde Valley*

*100 Meadowlark Drive*

*PO Box 13, Sedona, AZ 86339 ◦ 928.204.1286 ◦ [office@jcsvv.org](mailto:office@jcsvv.org) ◦ [www.jcsvv.org](http://www.jcsvv.org)*



# FAMILY MEMBERSHIP DUES PAYMENT FORM

July 1, 2024 – June 30, 2025 / 5785

- Receipt of this completed form by the JCSVV office, along with your dues payment, will establish your financial commitment for the membership year.
- Please inform the JCSVV Office of any changes to your address, phone numbers or email.

- Select your desired level of membership and payment plan by checking the boxes below.
- Choosing a higher level of dues in one of the Tzedakah Circles provides an extra measure of financial support for the synagogue, thereby making possible programs that inspire us, teach us, and connect us to each other.

## FAMILY MEMBERSHIP OPTIONS

	<u>Annual</u>	<u>Bi-Annual</u>	<u>Quarterly</u>	<u>Monthly*</u>
<input type="checkbox"/> BASIC LEVEL	<input type="checkbox"/> 1988	<input type="checkbox"/> 994	<input type="checkbox"/> 497	<input type="checkbox"/> 166*
<b><u>TZEDAKAH CIRCLES:</u></b>				
<input type="checkbox"/> Circle of Brachot – Blessing	<input type="checkbox"/> 2503	<input type="checkbox"/> 1252	<input type="checkbox"/> 626	<input type="checkbox"/> 209*
<input type="checkbox"/> Circle of Chesed – Goodness	<input type="checkbox"/> 3018	<input type="checkbox"/> 1509	<input type="checkbox"/> 755	<input type="checkbox"/> 252*
<input type="checkbox"/> Circle of Chochmah - Wisdom	<input type="checkbox"/> 3533	<input type="checkbox"/> 1767	<input type="checkbox"/> 884	<input type="checkbox"/> 295*
<input type="checkbox"/> Circle of Tikvah – Hope	<input type="checkbox"/> 4048	<input type="checkbox"/> 2024	<input type="checkbox"/> 1012	<input type="checkbox"/> 338*

Optional Synagogue Security Assessment - \$100 per member  \$100  \$100

Additional Synagogue Security contribution: \$ \_\_\_\_\_

.....

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### **\* MONTHLY BILLING**

This option is only available when the congregant arranges for a recurring e-check or provides a recurring credit card. See payment options on page 2.

### **OFFICE USE ONLY**

Date Payment Received \_\_\_\_\_

Amount \_\_\_\_\_ M Q A

Check No. \_\_\_\_\_ Other \_\_\_\_\_

CC# or Auto Pay to Finance \_\_\_\_\_



Print Name: \_\_\_\_\_

Print Name: \_\_\_\_\_

**PAYMENT OPTIONS:**

➤ Indicate your method of payment by checking one of the options below:

**CHECK** Enclosed, made out to the JCSVV; mail to PO Box 13, Sedona AZ 86339. State “Dues payment” on memo line.

**E-CHECK** - Arranged for with your bank, brokerage house or credit union.

➤ Please make the check out to the JCSVV and state “dues payment” on the memo line.

*I agree to arrange with my financial institution to send a check to JCSVV for my membership dues as indicated on my membership form.*

**QCD** – Qualified Charitable Distribution from an IRA–Made out to the JCSVV; state ‘dues payment’ on check

**CREDIT CARD:** *Credit card information is logged in and then the bottom part of this form is destroyed. Upon request, this information can be stored “on file” electronically to use throughout the current fiscal year for other charges as desired.*

*I authorize the Jewish Community of Sedona and the Verde Valley to add a 3% credit card processing fee.*

Card Type:            VISA                    Mastercard            American Express

\_\_\_\_\_  
Cardholder Name

\_\_\_\_\_  
Credit Card Number

\_\_\_\_\_  
Expiration Date

\_\_\_\_\_  
Security Code

\_\_\_\_\_  
Billing Zip Code

\_\_\_\_\_  
Cardholder Signature

\_\_\_\_\_  
Date

- ***Please be assured that no one will be denied membership in the JCSVV for financial reasons.***
- ***Every family or individual who desires to be a member of our community is valued and important.***
- ***Anyone who wishes to become a member is encouraged to join the JCSVV. If your situation requires a dues adjustment different from the amount stated, please contact the President, Sybil Malinowski Melody, at [jcsvvpresident@jcsvv.org](mailto:jcsvvpresident@jcsvv.org) or call the Office at 928.204.1286.***

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