

**FAMILY NEW MEMBERSHIP APPLICATION**  
**July 1, 2025 – June 30, 2026**

**Member:**       Mr.       Ms.       Mrs.       Dr.       Other \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

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 \_\_\_\_\_



**Spouse/Partner:**     Mr.       Ms.       Mrs.       Dr.       Other \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Gender:       Male     Female      Religious background:     Jewish     Other

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

Email \_\_\_\_\_

## JCSVV MEMBERSHIP DIRECTORY

Your 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 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 \_\_\_\_\_

## Donating your IRA distributions to a charity

This is an option you may choose for paying your membership dues or making other donations to the JCSVV.

Qualified charitable distributions (QCDs): Individuals can donate up to \$111,000 in 2026 and 2027 directly from a traditional or Roth IRA to qualifying charities. This is attractive to some members because QCDs can be used to satisfy Required Minimum Distributions (RMDs) from an IRA without having the distribution included in their income.

If you are interested in this option, we suggest you consult your personal financial planner.

## **MEMBER BACKGROUND**

Please let us know your interests, talents or background, so that we can learn more about our members:

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### **Get Involved**

Our synagogue depends on volunteer leadership. Please select your areas of interest below. When you get involved, you will meet other members and help build our JCSVV community/mishpacha. A synagogue member will call you to follow up and answer questions about committees, clubs and volunteer opportunities.

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Adult Jewish Education     | <input type="checkbox"/> Bikkur Cholim        | <input type="checkbox"/> Building Maintenance |
| <input type="checkbox"/> Bylaws & Policy            | <input type="checkbox"/> Cultural Events      | <input type="checkbox"/> Finance              |
| <input type="checkbox"/> Fundraising                | <input type="checkbox"/> Legacy Circle        | <input type="checkbox"/> Library              |
| <input type="checkbox"/> Marketing & Communications | <input type="checkbox"/> Membership           | <input type="checkbox"/> Men's Club           |
| <input type="checkbox"/> Office Support             | <input type="checkbox"/> Onegs & Holidays     | <input type="checkbox"/> Religious Affairs    |
| <input type="checkbox"/> Security                   | <input type="checkbox"/> Shalom Singers Choir | <input type="checkbox"/> Social Action        |
| <input type="checkbox"/> Social Activities          | <input type="checkbox"/> Tech & Graphics      | <input type="checkbox"/> Women's Havurah      |
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## **SPOUSE/PARTNER BACKGROUND**

Please let us know your interests, talents or background, so that we can learn more about our members:

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### **Get Involved**

Our synagogue depends on volunteer leadership. Please select your areas of interest below. When you get involved, you will meet other members and help build our JCSVV community/mishpacha. A synagogue member will call you to follow up and answer questions about committees, clubs and volunteer opportunities.

- |   |   |   |
|---|---|---|
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# FAMILY NEW MEMBERSHIP FORM

**July 1, 2026 – June 30, 2027**

- Receipt of this completed form by the JCSVV Office, along with your dues payment, will establish your financial commitment for the membership year.
- PLEASE COMPLETE THE GET INVOLVED SECTION ON THE PRIOR PAGE.
- Please inform the JCSVV Office of any changes to your address, phone number(s) or email
- Select your desired level of membership and payment plan by checking the boxes below.
- Please consider choosing the Benefactor Membership Package or a higher level of dues in one of the Tzedakah Circles if you are able.

## FAMILY MEMBERSHIP OPTIONS

	<u>Annual</u>	<u>Semi-Annual</u>	<u>Quarterly</u>	<u>Monthly*</u>
<b><u>BASIC LEVEL</u></b>	<input type="checkbox"/> 2,398	<input type="checkbox"/> 1,199	<input type="checkbox"/> 600	<input type="checkbox"/> 200*
\$2,198 + \$200 Security Assessment				
 <b><u>TZEDAKAH CIRCLES</u></b>				
Includes \$100 Security Assessment:				
<b>Circle of Brachot – Blessing</b>	<input type="checkbox"/> 2,854	<input type="checkbox"/> 1,427	<input type="checkbox"/> 714	<input type="checkbox"/> 238*
<b>Circle of Chesed – Goodness</b>	<input type="checkbox"/> 3,528	<input type="checkbox"/> 1,764	<input type="checkbox"/> 882	<input type="checkbox"/> 294*
<b>Circle of Chochmah - Wisdom</b>	<input type="checkbox"/> 4,096	<input type="checkbox"/> 2,048	<input type="checkbox"/> 1,024	<input type="checkbox"/> 341*
<b>Circle of Chochmah - Hope</b>	<input type="checkbox"/> 4,662	<input type="checkbox"/> 2,331	<input type="checkbox"/> 1,116	<input type="checkbox"/> 389*
<b><u>BENEFACTOR PACKAGE</u></b>	<input type="checkbox"/> 10,000	<input type="checkbox"/> 5,000	<input type="checkbox"/> 2,500	<input type="checkbox"/> 833*

**There is a Building Fund Commitment of \$5,000 (Family)/\$2,500 (Individual) payable over 5 years.**

- *If your situation requires a dues adjustment different from the amount stated, please contact the President, Sybil Malinowski Melody, at 928.204.1286 or email [jcsvvpresident@jcsvv.org](mailto:jcsvvpresident@jcsvv.org). All communications are confidential.*

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

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

\_\_\_\_\_  
City

\_\_\_\_\_  
State

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

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\* MONTHLY PAYMENTS**

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 3.

**OFFICE USE ONLY**

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

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

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

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



# Family New Membership Form 2026-2027

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

## PAYMENT OPTIONS

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

- CHECK**- Made out to the JCSVV; mail to PO Box 13, Sedona AZ 86339 or call the office to arrange a time to drop it off. State "Dues payment" on memo line.
- E-CHECK** - *I agree to arrange for my bank, brokerage house or credit union to send a check(s) to JCSVV for my membership dues as indicated on my membership form.*
  - Checks should be made out to JCSVV, include your name and state "dues payment" on the memo line.
- QCD** – Qualified Charitable Distribution from an IRA– *I agree to arrange for my IRA custodian to send a check(s) to JCSVV for my membership dues as indicated on my membership form.*
  - Checks should be made out to JCSVV, include your name and state "dues payment" on the memo line.
- 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
- I acknowledge that by paying by credit card, the Jewish Community of Sedona and the Verde Valley is authorized 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

**OFFICE USE ONLY:** Date Paymt. Rcvd \_\_\_\_\_ Amt \_\_\_\_\_ Chk No. \_\_\_\_\_ To Finance \_\_\_\_\_