



# Temple Emanuel of the Merrimack Valley

Rabbi Robin S. Sparr

## ✓ Yes, I'd like to be a TEMV member for 2018-2019!

In order to be considered a member of Temple Emanuel, you **must** return this form! Please do so by May 30, to help us better plan our year. The treasurer is always available to discuss any concerns or questions at [treasurer@temv.org](mailto:treasurer@temv.org).

Consider what you gave last year and perhaps giving a bit more.

Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**1. Membership** \$ \_\_\_\_\_

The attached letter and pie chart will help you get an idea of what it costs to run the temple; please pledge what you can!

**3. Social Action Fund (\$10 suggested minimum donation)** \$ \_\_\_\_\_

**4. TEMV Scholarship Fund (optional)** \$ \_\_\_\_\_

*Used to offset members who are unable to pledge as much and/or families who cannot afford the Religious School fees.*

**Total (please add answers from questions 1-4)** \$ \_\_\_\_\_

- I promise to pay: \$\_\_\_\_\_ monthly
- I promise to pay: \$\_\_\_\_\_ quarterly.
- My total payment is enclosed.
- I will use PayPal (use the donate link on website [www.temv.org](http://www.temv.org))

Check # \_\_\_\_\_ Date: \_\_\_\_\_

I would like a member of the board to contact me regarding my membership pledge.

✓ **I agree to fulfill my pledge to Temple Emanuel of the Merrimack Valley by April 30, 2019.**

**Member signature:** \_\_\_\_\_

**Thank you for your 2018-2019 membership at Temple Emanuel!**

Please send this form and your payment to  
Treasurer, Temple Emanuel, 101 W. Forest St, Lowell, MA 01851