

Jewish Learning Institute • Friday with Friends • Rosh Chodesh Society • Camp Gan Israel •
 Chabad Hebrew School • Live Town • Friendship Circle
 Jewish Kids Club • JLI Teens • Purim Night • The Great Challah Bake • Chabad at OSU • Sukkot •

A warm, inclusive, community...
open to all. **Chabad COLUMBUS**

Membership Form 5781 (2020-2021)



THE LORI SCHOTTENSTEIN
 CHABAD CENTER
 6220 Dublin Granville Road
 New Albany, Ohio 43054
 614.939.0765

New Renewal

If RENEWAL you only need to update information that has changes from last year

PRINCIPAL MEMBERS

Name _____	Name _____
Jewish Name _____	Jewish Name _____
Birthdate _____ <input type="checkbox"/> am <input type="checkbox"/> pm	Birthdate _____ <input type="checkbox"/> am <input type="checkbox"/> pm
Mother's Jewish Name _____	Mother's Jewish Name _____
Father's Jewish Name _____	Father's Jewish Name _____

CHILDREN

Name _____	Jewish Name _____	Birthdate _____	<input type="checkbox"/> am <input type="checkbox"/> pm
Name _____	Jewish Name _____	Birthdate _____	<input type="checkbox"/> am <input type="checkbox"/> pm
Name _____	Jewish Name _____	Birthdate _____	<input type="checkbox"/> am <input type="checkbox"/> pm
Name _____	Jewish Name _____	Birthdate _____	<input type="checkbox"/> am <input type="checkbox"/> pm
Name _____	Jewish Name _____	Birthdate _____	<input type="checkbox"/> am <input type="checkbox"/> pm
Name _____	Jewish Name _____	Birthdate _____	<input type="checkbox"/> am <input type="checkbox"/> pm

Do you have college age children and what are their names and e-mail address(es)?

CONTACT INFORMATION

Home Address _____

Work Address _____

PHONE: Home _____ Cell _____ Work _____

Email(s) _____

YARTZEITS

Jewish Names _____	Date _____	Relationship _____
Jewish Names _____	Date _____	Relationship _____
Jewish Names _____	Date _____	Relationship _____

PREFERENCES

I/we are interested in the following:

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Attending weekly classes | <input type="checkbox"/> Hebrew School | <input type="checkbox"/> Chevra Kadisha | <input type="checkbox"/> Shabbat Morning Minyan |
| <input type="checkbox"/> Women's Chessed Group | <input type="checkbox"/> Men's Club | <input type="checkbox"/> Shabbas Club | <input type="checkbox"/> Youth Group |

Please see back side for membership benefits and payment information. You may also register online at chabadcolumbus.com.

Membership Form 5781 (2020-2021) *continued*



THE LORI SCHOTTENSTEIN
CHABAD CENTER



BENEFITS OF MEMBERSHIP

Single & Family Membership Includes:

- Hebrew school reduced tuition
- Bar/Bat Mitzvah facilitation
- 30% discount on social hall rental
- Jewish Learning Institute (JLI) Class Discounts

Enhanced Membership Also Includes:

- Priority reservation on kiddush sponsorship for one occasion of your choice
(Please 614-939-0765 to reserve your special date)

Associate Membership Includes:

- Jewish Learning Institute (JLI) Class Discounts

MEMBERSHIP LEVELS AND CATEGORIES

- | | | |
|---|--|--|
| <input type="checkbox"/> Single Membership \$850 | <input type="checkbox"/> High Holiday Aliyah \$400 | <input type="checkbox"/> High Holiday Yizkor Unlimited Family Listings \$155 |
| <input type="checkbox"/> Single Enhanced Membership \$1,250 | <input type="checkbox"/> Special High Holiday Aliyah \$1,000 | <input type="checkbox"/> Remembrance Wall Plaque \$1,000 |
| <input type="checkbox"/> Family Membership \$1,350 | <input type="checkbox"/> Kiddish Sponsorship \$400 | |
| <input type="checkbox"/> Enhanced Family Membership \$1,650 | | |
| <input type="checkbox"/> Associate Membership \$750 (if a member of another shul) | | |
- Total _____

MEMBERSHIP PAYMENT INFORMATION

- Please invoice me
- My check is enclosed
- Please charge my credit card for full amount
- Please charge my credit card in:
- 3 6 9 or 12 installments

Please return to: The Lori Schottenstein Chabad Center
6220 E. Dublin-Granville Road, New Albany, OH 43054
614-939-0765 | www.ChabadColumbus.com

<input type="checkbox"/> Visa	<input type="checkbox"/> MC	<input type="checkbox"/> AE	<input type="checkbox"/> Disc
CC # _____			
EXP: _____		SIC: _____	
SIGNATURE: _____			

**Please make checks payable to The Lori Schottenstein Chabad Center.
Thank you for supporting our shul!**

OSU Chabad House, Inc. dba The Lori Schottenstein Chabad Center, a 501(c)(3) organization under the Internal Revenue code, acknowledges that your contribution is tax deductible as no goods and services were provided in exchange for the contribution.