



You belong here.™

2011-2012 Membership Application

*Please remove this application and refer
to membership rates on the pages following
to determine payment information.*

**Questions about membership or need more info?
Contact Daniel Lukin-Beck at 253-0701 ext. 114
or email daniel@jcc-asheville.org.**

Return your completed application with payment to:
the Asheville JCC, 236 Charlotte Street, Asheville, NC 28801

Additional copies can be downloaded at www.jcc-asheville.org.

Asheville Jewish Community Center 2011-2012 Membership Application

Adult Name (1) _____ DOB _____

Address _____

City _____ State _____ Zip _____ - _____

Home Phone _____ Cell _____

E-mail Address _____

Occupation/Business Name _____

Business Address _____

Phone _____ E-mail _____

Adult Name (2) _____ DOB _____

Address _____

City _____ State _____ Zip _____ - _____

Home Phone _____ Cell _____

E-mail Address _____

Occupation/Business Name _____

Business Address _____

Phone _____ E-mail _____

Marital Status M S D W

Dependents: *Please list individually*

First Name	Last Name	Gender	Grade	DOB
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1.

2.

3.

4.

Affiliation information is voluntary and is for statistical purposes only:

Are you a member of:

Congregation Beth HaTephila Congregation Beth Israel

Chabad Other _____

Is anyone in your household Jewish? Yes No

Is your household “interfaith” (*Jewish & other*)? Yes No

Membership Agreement

I, the undersigned, hereby make application for membership to the Asheville Jewish Community Center for the membership year May 1, 2011 - April 30, 2012. I agree to abide by the rules and bylaws. I understand the membership is on an annual basis, payable in advance, and is neither transferable nor refundable.

Hold Harmless Agreement

Participation in any Asheville JCC activities and use of recreational facilities involves a risk of accidental injury despite all safety precautions. Having been informed of the activity to be conducted by the Asheville JCC, I/we as an individual or as a parent/ guardian of the participant named above, assume all risks and hazards incidental to the activities and release from responsibility and agree to indemnify and hold harmless the Asheville JCC, its officers, directors, independent contractors, volunteers, and employees for any illness or injury to me, my children or family members occurring during participation in any activities at, or off site conducted by, the Asheville JCC.

I have read the above agreements and enclosed JCC policies and I understand and agree to the Asheville JCC's Membership and Hold Harmless agreements and all other state obligations.

Applicants signature _____

Date _____

Select Membership Type

Full JCC Membership

- Family - \$495
- Single Parent Family - \$370
- Adult Couple - \$400
- Young Adult - \$136
- Individual Adult - \$240
- Senior Adult - \$220
- Senior Couple - \$300
- Non-resident Friend - \$54

Social Membership (*Adults - without pool*)

- Couple - \$250
- Individual - \$180

Pool Only Membership

- Family - \$450
- Couple - \$350
- Individual - \$225

NEW! Membership & Donation Payment Plan

For contributions of \$250 and greater, you may opt to take advantage of a “spread out my generosity” payment plan. This allows you to make four payments on your combined total (membership and donation) through monthly, automatic credit card charges. Must be paid in full by 12/15/11.

Payment Information

Membership Payment \$ _____
(above selection)

100% Tax Deductible Donation \$ _____
The JCC is a 501c3 non-profit charitable organization.

Total Payment \$ _____

- I would like to accept the Membership & Donation Payment Plan.
Please charge my credit card in 4 equal, monthly installments of my total payment.
- Please charge one payment of \$ _____ to my credit card.
 - Visa MasterCard

Account # _____ Exp. Date _____

Signature _____

- Payment by check is enclosed. Check payable to the Asheville JCC.

For Office Use Only

Date Received: _____

_____ MM _____ DLB _____ HG _____ MT _____ RR