

BETH ISRAEL ANNUAL PLEDGE FOR 2020

Name: _____

2019 Pledge \$ _____

2020 Pledge \$ _____

PAYMENT OPTIONS: (Please check one box)

For your convenience, we are offering everyone the opportunity to have their pledge drawn automatically from their bank account or credit card. If you are currently not doing this, please consider this for 2020. Please indicate below your payment option preference.

1. I would like to pre-pay my 2020 pledge _____

	Monthly	Quarterly	Semi-Annually
2. I would like to have my pledge drawn by bank draft . Routing Number: _____ Account Number: _____	_____	_____	_____

3. I would like to have my pledge charged to my credit card. (Bookkeeper will contact you for information.)	_____	_____	_____
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4. I would like to mail my pledge	_____	_____	_____
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We encourage and welcome contributions to these funds.

I would like to make an additional contribution of	One Time	Monthly	Quarterly
\$ _____ to the Capital Improvement fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the Cemetery fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the General fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the Programming fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the BITY fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the Religious Education fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the Music fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the Saturday Morning fund (In honor/memory/appreciation of _____)	_____	_____	_____
\$ _____ to the Chevra Kadisha fund (In honor/memory/appreciation of _____)	_____	_____	_____

I PLEDGE THE ABOVE TO BE PAID IN FULL BY DECEMBER 31, 2020 and understand that if I do not submit a pledge form, that I will be removed from the Beth Israel Congregation membership.

Signature

Date