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# CHABAD OF SUSSEX COUNTY

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*An affiliate of the Chabad Center of Northwest NJ and the Rabbinical College of America*

## MEMBERSHIP DONATIONS & MEMORIAL PLAQUES

July 12, 2010

Dear Friend,

We hope you receive this letter in the best of health and spirit.

At Chabad of Sussex County we have always welcomed every Jew with open arms, regardless of background, affiliation or financial means. Members and non-members alike sit side by side. This is a core value of our center that we hope to always maintain.

But membership also has its advantages. Membership in a congregation makes you feel good about being a partner in supporting the financial obligations of the organization that serves your Jewish and spiritual needs. It means that you have a share in the Mitzvah of offering every single Jew in Sussex County the opportunity to partake in, and learn about our wonderful heritage. It means that you are keeping Judaism alive, and seeing it continue to the next generation.

Therefore we ask that you make a membership donation to Chabad of Sussex County in honor of the New Year. Membership contributions for the coming year beginning with Rosh Hashanah 2010 are \$800.00.

We also suggest that you consider memorializing a loved one through the purchase of a plaque on our beautiful memorial wall. Costs are \$250.00 per name.

Please fill out the attached form and return it to us.

If you have any questions or comments, or if there is any way we can be of service to you, please do not hesitate to contact us at (973) 726-3333 or by email at [rabbi@nac.net](mailto:rabbi@nac.net)

Sincerely,

Rabbi Shmuel & Toby Lewis  
Directors

**ANNUAL MEMBERSHIP DONATION  
& MEMORIAL PLAQUES  
5771 – 2010/11**

Name \_\_\_\_\_

Address \_\_\_\_\_

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

*[This section should only be filled out if there is information that has not been submitted in the past.]*

Number of family Yahrtzeit dates \_\_\_\_\_

● Please use the other side of this form to write the Names, Jewish Names, Parents Jewish Names, Relationship, and Date (Month, Day, Year) of Yahrtzeit (for English dates please mark if it was after sundown)

I would like to make a membership donation of \$800.00 to Chabad of Sussex County.

I would like to memorialize:

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
(Please use the other side of form for additional names)

through the purchase of \_\_\_\_\_ plaques for \$250.00 each.

**Payment Method by:**

- Check: (payable to “Chabad of Sussex County”)
- Visa or  MasterCard

16 digits \_\_\_\_\_

Date of Expiration \_\_\_\_\_ Signature \_\_\_\_\_

Membership donations and memorial plaques are payable as follows:

- Full payment before October 1, 2010, or \_\_\_\_\_ (please choose a date).
- Two payments (50% before \_\_\_\_\_, and 50% before \_\_\_\_\_ (please choose the dates).
- 12 postdated checks (dated Oct. 1<sup>st</sup> 2010-Sept. 1<sup>st</sup> 2011), or a credit card number that will be charged \$ \_\_\_\_\_ on the first of each month (from Oct. 2010 – Sep. 2011).
- Other \_\_\_\_\_

**Please return this form to the following address:  
Chabad of Sussex County, 191 Woodport Road Suite 208C, Sparta, NJ 07871**