

Membership Form – NCJW Austin Section

Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Email Address: _____

NCJW Austin needs you! Please offer your talents and support to the committee teams that fit your interests. Check as many as you'd like. A team lead will contact you to discuss your involvement.

_____ Membership

_____ Fundraising

_____ Public Policy

_____ Communication

_____ Administration

_____ No Place for Hate

_____ Programming

_____ Community Services

Special interests or talents: _____

Willing to host an event at your home: _____

(please consider parking, central location, & size of group as events may have 30 - 50 attendees)

NCJW has been championing the needs of women, children, and families for over 125 years. Your on-going support of the Austin Section of NCJW through annual dues payments and donations allows us to continue this important work protecting individual civil rights in the U.S. and in Israel.

If you would like to make an additional donation to NCJW Austin please do so along with your dues payment. NCJW Austin is recognized as an organization described in section 501(c)(3) of the Internal Revenue code. Contributions are tax-deductible to the extent permitted by law.

Please enroll me as a (choose one):

_____ **New NCJW Austin Member** (\$36 annual dues)

_____ **Renewing NCJW Austin Member** (\$36 annual dues)

_____ **Current NCJW Life Member** (\$0 annual dues)

(this membership level is no longer available but previous Life Memberships are honored)

If you would like to make an additional donation please enter amount here: \$ _____

Dues: \$ 36

Total Payment: \$ _____

Complete this form and mail it with your check made payable to:

NCJW Austin Section
PO Box 26641
Austin, TX 78755-0641

Thank you for joining NCJW!