



MEMBERSHIP 2021-22

Please print clearly and
complete all requested information

Name: _____

Mailing Address: _____
(Street) (City) (Zip)

Email: _____

Home Telephone: (____) _____

Cell Telephone: (____) _____

Membership level: — \$ 36.00
— \$ 500.00 Woman of Valor
— Additional donation of \$ _____

— Check in the amount of \$ _____ enclosed.

Charge Credit Card: ___ Visa
— Mastercard

Card #: _____

Card expiration: _____ Security code (3 digits): _____ Billing zip code: _____

Mail form with credit card information or check payable to "PJTC Sisterhood" to Aty Rotter, 1425 Rexford Avenue, Pasadena, California 91107. Alternatively, you can scan and email form with credit card information to Aty Rotter at Atalya19@aol.com or call Aty at (626) 664-4509. Please do not mail or turn in form and payment to the PJTC Office or bookkeeper or include with synagogue dues payment.