



A Blend of Faith and Friendship for Over 100 Years

MEMBERSHIP RENEWAL 2022-2023

Print and Return this form to:
Temple Beth Elohim
PO Box 571
Georgetown, SC 29442
Attn: Michele Bennett, Treasurer

NAME: _____

MEMBERSHIP CATEGORY - CHECK ONE

PLEASE NOTE: This amount reflects the \$75 and \$50 assessment for Family and Single memberships.

___ Family-\$575 ___ Single-\$410 ___ Associate Family-\$350 ___ Associate Single \$250
___ Friends-\$40

ADDITIONAL DONATIONS: (optional)

\$_____ General Fund

\$_____ Cemetery Fund

\$_____ Dues

\$_____ TOTAL

Make your check payable to Temple Beth Elohim and mail it no later than July 5, 2022.

If you need to make changes to your information (address, phone numbers, etc.), please add them to the back of this form.

Do you have Yahrzeits to add? Please list them on the reverse. Include the name of the deceased, date of death and relationship.

Thank you for renewing your TBE Membership!

Joy Birnbaum,
Membership Chair

Michele Bennett,
Treasurer