



**JEWISH
COMMUNITY
CENTER OF
SYRACUSE**

MEMBERSHIP APPLICATION

(Please complete both sides of this application)

5655 Thompson Rd. ■ DeWitt, NY 13214 ■ 315-234-4522 ■ www.jccsyr.org

MAIN INFORMATION

Last Name _____ Marital Status M S D W

Address _____

City _____ State _____ Zip _____

Home Phone _____

Home Email _____

Optional Information (Will be used for statistical purposes only.)

Synagogue Affiliation _____

Not Affiliated

Not Applicable

PRIMARY MEMBER

(Circle One) Mr. Mrs. Ms. Miss Dr.

First Name _____

Date of Birth _____

Occupation _____

Employer _____

Business Address _____

City _____ St _____ Zip _____

Bus. Phone _____

Bus. E-mail _____

Bus. Fax _____

If Dependent Student (Must be full-time student):

School _____ Grade/Year _____

Phone _____

E-mail _____

MEMBER #2

(Circle One) Mr. Mrs. Ms. Miss Dr.

First Name _____

Date of Birth _____

Occupation _____

Employer _____

Business Address _____

City _____ St _____ Zip _____

Bus. Phone _____

Bus. E-mail _____

Bus. Fax _____

If Dependent Student (Must be full-time student):

School _____ Grade/Year _____

Phone _____

E-mail _____

CHILDREN / DEPENDENT STUDENTS

First Name	Last Name	Sex	D.O.B.	School Grade/Yr.	Email
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____

ACCEPTANCE OF JCC OF SYRACUSE MEMBERSHIP (Must Be Signed and Dated)

I, the undersigned, for myself and all persons listed above, hereby affirm the following:

I am making application for membership in the Jewish Community Center of Syracuse. I agree to abide by its rules and bylaws. I understand that all members 18 years and older may participate in the Annual Meeting of the JCC.

I understand that membership dues are payable in full at the time of joining or renewal, unless a payment plan has been approved in advance.

A payment plan only specifies the manner in which payments will be made and does not reflect a month-to-month membership commitment. If paying with a payment plan, I authorize the JCC Family Sports and Fitness Center to automatically charge my credit card account for each consecutive month of the plan.

I understand that membership dues are automatically renewed each year unless I give notice in writing, and that membership is not transferable.

I understand that membership dues are non-refundable.

Applicant's Signature

Date