



JCCs of North America

מרכזים קהילתיים יהודיים בצפון אמריקה

Donation Form

Gift Amount:

- \$2,500 \$1,800 \$1,000 \$500 \$250
 \$136 \$50 \$36 \$18 other \$_____

Method of Payment:

- Check enclosed
 Credit Card (choose one: MasterCard Visa American Express)
Name as it appears on card _____
Credit Card Number _____ Exp. Date _____
Signature _____

Donor Information:

Name _____
Street Address _____
City _____ State _____ Zip _____
Phone _____
E-mail _____
I am a member of _____ JCC

Designate my gift to (please check one):

- JCC Association
 JCC Maccabi Experience
 JWB Jewish Chaplains Council

For Tribute Only (\$18 minimum gift):

- Tribute - In honor of _____
 Tribute - In memory of _____
 Tribute - Wishes for a speedy recovery to _____

Please Notify: (for Tribute only)

Name _____
Street Address _____
City _____ State _____ Zip _____

For questions please contact donate@jcca.org or call (212) 786-5099
Visit JCC Association's website at www.jcca.org

Print this form and mail or fax to:

JCC Association, Attn: Online Giving
520 Eighth Avenue | New York, NY 10018 | fax: 212.481.4174