



Congregation Shaarey Zedek
Sisterhood 
 Women's League for Conservative Judaism



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2019-2020 MEMBERSHIP FORM

Name (PLEASE PRINT) _____

Address _____

Postal Code _____

Telephone _____

Email _____

VISA/MC Number _____

Expiry _____

Security Code _____

Please do ___/do not ___ give my e-mail to Women's League for Conservative Judaism. (Please note: we will NOT share your email address with anyone else.)

ITEM DESCRIPTION	AMOUNT PAID	DUE DATE
SISTERHOOD DUES 19/20	\$36 /\$54 /Other	Due on Receipt

Our Mission: To foster amongst our members, through leadership, learning and fellowship, a love of Judaism and support for the State of Israel, and to provide educational, spiritual, financial and volunteer guidance and support to the communities within which we function: our synagogue, our city, and the international Jewish community.