



2024 DUES STATEMENT

Save time and paper, complete your membership online: PARRabbis.org/joinus

PERSONAL INFORMATION

Name: _____

Email: _____

Preferred Phone: _____ WORK HOME CELL

Address: _____

Address Second Line: _____

City: _____

State/Province: _____ Zip/Postal Code: _____

Country: USA Other: _____

Ordaining Institution: _____ Ordination Year: _____

EMPLOYMENT

Name of your organization: _____

Which best describes your current employment status?

Full Part-time Retired Student Self-Employed Not Employed

Would you like your information included in our directory? YES NO

MEMBERSHIP

Select your category?

Retired.....**Free**

Retired Rabbis are exempt from dues.

Regular.....**\$50**

Includes non-congregation rabbis.

ADDITIONAL PARR CONTRIBUTIONS*

We welcome your additional support of PARR.

Donation.....\$ _____

Total Enclosed: \$ _____

**Support of Mazon is also encouraged (suggested: \$5.00 per person).*

Please include a separate additional check, payable to Mazon.

Please remit dues payable to: **Pacific Association of Reform Rabbis** and send your payment to **PARR, 3053 Rancho Vista Blvd, Suite H-148, Palmdale CA 93551**