



APPLICATION FOR DISCRETIONARY CONSIDERATION 2011 - 2012

This information is kept strictly confidential.

**Please complete this application each year
for which financial consideration is necessary for you.**

| | |
|---|--------------------------------------|
| Member's Name | Co-Member's Name |
| Member's Occupation | Co-Member's Occupation |
| Child(ren) attending <i>Gesher</i> School | <i>Gesher</i> School class this year |

When is the best time to reach you? _____ At what phone number? _____

| | |
|--|---|
| Annual Income from all sources: \$ _____ | For Discretionary Committee |
| Membership Category: (✓ category) | Regular Dues/Fees (see Financial Obligation Form) |
| What you can pay | |
| Household _____ | \$ _____ |
| Senior House _____ | \$ _____ |
| Single Parent _____ | |
| Single Person _____ | |
| Single Senior _____ | |
| <i>Gesher</i> school fees | \$ _____ |
| Annual JRF Fee | \$80 _____ |
| TOTAL YOU PLEDGE TO PAY | \$ _____ |
| | \$ _____ Approved |
| ✓ Payment Schedule: <input type="checkbox"/> Annual <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> 10 Mthly Pmt | |
| PLEASE NOTE: ALL DUES AND FEES MUST NOW BE COMPLETELY PAID BY 4/30/12 | |
| Credit Card _____ | Exp _____ Authorization (initials) _____ By _____ |

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Attach additional paper, or write on the back if more space is needed.

Member's Signature _____ Date _____

Co-Member's Signature _____ Date _____