



Corporate Membership

Terms of Agreement:

- Minimum of ten (10) current employees required to enroll and maintain Corporate Membership.
- Corporation is responsible for notifying the JCC of changes in employee eligibility.
- Individual Join Fees are waived (100%) for employees.
- Individual Monthly Membership Dues is discounted 20% per employee (no other discounts apply).
- Corporation is responsible for monthly payment to JCC (provide billing information below).

Business Information:

Corporate Name _____

Website Address _____

Street Address _____

() -
Business Telephone: _____

City _____ State _____ Zip Code _____

() -
Business FAX Number: _____

Primary Contact Information:

Contact Name (Last, First, MI) _____

Contact Email Address _____ @ _____

Contact Title _____

() -
Contact Telephone: _____

Billing Information:

Credit Card: MasterCard VISA Discover AMEX

Name on Card: _____

Credit Card Number: _____ - _____ - _____
16 digits (Amex = 15 digits)

Expiration Date: ____ / 2 0 ____

CVC / Security Code: _____
3 digits (Amex = 4 digits)

ACH/EFT Draft: ___ Checking Account ___ Savings Account

Name on Account: _____

Account Number: _____

Routing Number: _____

Authorization:

I give the Shames JCC on the Hudson, Inc. permission to draft recurring membership related charges **monthly** from the account indicated above.

AUTHORIZED CORPORATE SIGNATURE

Entered on: _____

____ / ____ / 2 0 ____

By: _____

Submit Corporate Membership Application with initial (10) Employee Forms:

- In person or snail mail to Shames JCC, 425 S. Broadway, Tarrytown, NY 10591, Attn: Membership
- Email to info@shamesjcc.org
- Fax to 914-366-7434