



Greater Miami Jewish Federation

JewishMiami.org

Your Information

Name:

First Name* _____

Last Name* _____

Spouse:

First Name _____

Last Name _____

Mailing Address:

Address 1* _____

Address 2 _____

Apt./Suite # _____

City* _____

State* _____

ZIP Code* _____

Additional Information:

Telephone Number* _____

Mobile Number _____

Email Address _____

Billing Address:

Address 1* _____

Address 2 _____

Apt. /Suite # _____

City* _____

State* _____

ZIP Code* _____

Your Contribution

By Credit Card:

Greater Miami Jewish Federation Account # (If Known): _____

Please charge the credit card below in the total amount of \$ _____

to the Greater Miami Jewish Federation/UJA Campaign.

Please select how you would like your payment to be billed from one of the options below.

1. I would like to pay in full.
2. I would like to pay in _____ installments beginning: _____

* Name on Card: _____

* Card Number: _____

* Type: _____

* Expiration Date: _____

* Validation Code : _____

(3- or 4-digit code on the back of credit card)

By Check:

If you would like to make a gift by check, you can mail your check payable to:

Greater Miami Jewish Federation
Att: Make a Gift
4200 Biscayne Boulevard
Miami, FL 33137

If you have any questions, please call 305-576-4000, ext. 428.

Comments:

The Mission of the Greater Miami Jewish Federation is to mobilize human and financial resources to care for those in need, strengthen Jewish life and advance the unity, values and shared purpose of the Jewish people in Miami, in Israel, and around the world.

A copy of the official registration and financial information may be obtained from the division of consumer services by called toll-free (800-435-7352) within the state. Registration does not imply endorsement, approval or recommendation by the state. CH 435. 100% of each contribution is used to carry out the mission of the Greater Miami Jewish Federation.