



National Association of Jewish Chaplains

901 Route 10
Whippany, NJ 07981

DUES INVOICE 2009-10

NAME
ADDRESS

Invoice Date: 7/1/2009

Category: Certified or Member

PLEASE RETURN INVOICE UPON RECEIPT AND MAKE PAYMENT TO NAJC (IN U.S. DOLLARS ONLY).

DUES CALCULATION

1. Enter your total chaplaincy income (Salary & parsonage/housing allowance) on line a. a) _____

Multiply a by .005 & enter the total on b.
(If your total chaplaincy income on line a is less than \$6000, enter "0" on line b.) b) _____

2. All certified & regular members: \$125 base/minimum dues. (See line c.) c) \$125.00

3. Add b plus c for your total 2009-10 dues on line d.
(If the total would be greater than \$500, enter \$500, the maximum dues on line d.) d) _____

4. Journal of Pastoral Care & Counseling
(If you wish to receive the JPCC, please add \$20 on line e.) e) _____

5. Total dues and JPCC enclosed: f) _____

Dues Signature : [Required]

Name: _____

Voluntary Contributions:

Howard Kummer Fund, Endowment Fund, Israel Initiative, General Fund \$

Circle your selection. Please send a separate check for your donation. Thank you.

Given the economic climate that exists at the present time, the NAJC will not increase the dues structure for the coming year.

It is the policy of the NAJC not to deny the privileges of membership in the case of financial hardship. Anyone unable to meet his/her dues requirements should contact the treasurer. Such communication will be held in the strictest confidence.

Phone #	Fax #	E-mail	Web Site
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