

Congregation Beth HaTephila Food Card Agreement Monthly Recurring Orders

We are looking for 100% participation

You get the Full Face Value of Food Cards, and the Temple and congregation benefit. EVERYBODY EATS!

We want to help the Temple meet its costs for our beautiful facility, Religious School and more!

I / We, _____ would like the following food gift cards on a monthly basis (at the beginning of each month):

GROCERY STORE	DENOMINATION	QUANTITY	TOTAL
INGLES	\$50		\$
	\$100		\$
	\$200		\$
	\$300		\$
EARTHFARE	\$50		\$
	\$100		\$
	\$200		\$
FRESH MARKET	\$50		\$
	\$100		\$
GREENLIFE / WHOLE FOODS	\$50		\$
	\$100		\$
GRAND TOTAL			\$

PAYMENT: (check one choice below)

_____ **Bank Draft - Preferred** (Please complete enclosed bank draft form)

_____ **Credit Card** (Please add 3% to cover fees incurred by Temple*)

Card # _____

Expiration Date _____ **CV/Security Code** _____

Signature _____ **Date:** _____

*** We lose half of the donation from the grocery company to the Temple to credit card fees. We ask that you increase your payment by 3% to offset this loss. There are no fees with an Automatic Bank Draft. .**

DELIVERY: (check and initial one choice below)

_____ I will pick up my card(s) in person. No risk, no premium.

_____ Mail my card(s) via First Class mail (I trust the U.S. Postal Service to deliver my card but will hold CBHT harmless if my card(s) is/are lost in the mail.)

_____ Mail my card(s) via Registered mail. Add \$5 / month premium to my billing for postage.

Address: _____