

Kol Haverim Brotherhood Dues Statement

Name _____

Address _____

Home Phone Number _____

Work Phone Number _____

Email Address _____

**A \$36.00 tax deductible contribution to the
Kol Haverim Brotherhood would be greatly
appreciated to help fund some of our activities.**

Please return this form to:

**Kol Haverim Brotherhood
1079 Hebron Avenue
Glastonbury, CT 06033**