

GUIDE TO CHODOSH SUBSCRIPTION FORM

Please Check One:

NEW SUBSCRIPTION

RENEWAL with Same Address

RENEWAL with New Address

Current Price:

\$18 to be mailed within the US.

\$20 for Canada and Mexico.

\$25 for Israel and other countries

Name: _____
(Title) (First Name) (Middle) (Family Name) (Suffix)

Address: _____
(Number) (Street Name) (Apartment #)

(City) (State/Province) (Zip Code) (Country)

Phone Number: _____

PAYMENT Please Select an Option:

Check (Enclosed)

Payable to: "Project Chodosh"
For Check Orders Please Mail this Form
and the Check to:

**Project Chodosh,
c/o Mrs. C. Roskamm,
963 Armstrong Ave,
Staten Island, NY 10308**

For security reasons:
NEVER e-mail private information (such
as credit card numbers) over a normal,
unsecured e-mail connection.

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or Project Chodosh.)

CREDIT CARD (Faxed)

MasterCard

Visa

Discover

Credit card number:

□□□□ - □□□□ - □□□□

Expires: (MM) □□ / (YY) □□ CVC □□□

American Express credit card number:

□□□□ - □□□□□□ - □□□□□□

Expires: (MM) □□ / (YY) □□ CVC □□□□

Exact Name on Card:

For Credit Card Orders Please Fax this Form to:
1-888-755-7590 (no cover letter needed)

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YES

NO