

**DONATION FORM**

Donor Name: \_\_\_\_\_ Card to: \_\_\_\_\_

Street: \_\_\_\_\_ Street: \_\_\_\_\_

City: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Inscribed Book Plates**

High Holiday Mahzor \$20.00

Siddur Or Shalom \$20.00

**Engraved Plaques**

Tree of Life \$ 72.00

Yahrzeit \$200.00

Memorial Plaque \$200.00

State wording for High Holiday Mahzor or Siddur Or Shalom **Book Plates:**

In Memory Of: \_\_\_\_\_ By: \_\_\_\_\_

In Honor Of: \_\_\_\_\_ By: \_\_\_\_\_

Other: \_\_\_\_\_

State wording for **Tree of Life Leaves:**

In Honor Of: \_\_\_\_\_ By: \_\_\_\_\_

Other: \_\_\_\_\_

**For Yahrzeit Plaques**

Name of Deceased \_\_\_\_\_

Hebrew Name \_\_\_\_\_ Ben (son of) \_\_\_\_\_ Bat (daughter of) \_\_\_\_\_

Date of Death \_\_\_\_\_ Did the Death occur in the evening?  yes  no

**Memorial Plaques (non Jewish):**

Name of Deceased \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Death \_\_\_\_\_

**Rabbi Greenberg Scholarship:** Donation amount: \_\_\_\_\_

**Hebrew School:** Donation amount: \_\_\_\_\_

**Kiddush:** Donation: \$100 for a basic Kiddush, \$125 with Lox

Make checks payable to: **Temple B'nai Shalom**

Mail to: Temple B'nai Shalom, 41 Storrs Ave, Braintree, MA 02184

Questions: Marylou Fishman 617.921.0368

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