



## DONATION FORM

Date: \_\_\_\_\_ Donor Name: \_\_\_\_\_

Donor Address: \_\_\_\_\_

### DONATION TYPE:

- |  |   |
|--|---|
| <input type="checkbox"/> General Donation (any amount)     | <input type="checkbox"/> Memorial Plaque (\$360)      |
| <input type="checkbox"/> High Holy Day Appeal (any amount) | <input type="checkbox"/> Tree of Life Leaf (\$180)    |
| <input type="checkbox"/> Prayer Book Dedication (\$36)     | <input type="checkbox"/> Tree of Life Stone (\$1,000) |
| <input type="checkbox"/> Endowment (\$1,800 minimum)       |   |
| <input type="checkbox"/> Other: please specify: _____      |   |

### PLEASE SPECIFY (if applicable):

In Memory of: \_\_\_\_\_ In Honor of: \_\_\_\_\_

In Appreciation of: \_\_\_\_\_ Special Occasion: \_\_\_\_\_

Please make check payable to Temple Ner Tamid and send to 936 Broad Street, Bloomfield, NJ 07003.

Your donation (without the amount) will be listed in Temple Topics. Our hope is that our growing list of donors will inspire others to give. However, please indicate if you prefer your donation to be anonymous.