

SYNAGOGUE DONATION FORM

MAIL THIS FORM TO:
 CONGREGATION BETH TORAH
 720 W. LOOKOUT DRIVE
 RICHARDSON, TX 75080
 ATTENTION: DONATIONS

DATE: _____
 SEND CARD TO: _____

MESSAGE TO READ AS FOLLOWS: _____

YOUR NAME: _____
 AMOUNT: _____ METHOD OF PAYMENT: CHECK: _____
 CREDIT CARD #: _____

DONATION TO BE APPLIED TO THE FOLLOWING FUND: \$5 MINIMUM

- _____ Mark A. Siegel Adult Education _____ Education Endowment
- _____ Ackerman Library _____ Gruen Library _____ Cemetery
- _____ Building Fund _____ Camp Scholarship _____ Pre-School
- _____ Learning Center _____ Ritual _____ Youth
- _____ Rabbi's Discretionary _____ Dee Dee Fields McKittrick Torah Fund
- _____ Esther Cohen Pre-School Scholarship _____

FOR YOUR INFORMATION

Donations to the Ritual Fund are applied to the purchase of ritual related items. You can purchase a Chumash Etz Chaim @ \$60.00 and have it inscribed.

Inscription to read: _____

ENGRAVED BRICK ORDER FORM

Mail completed form to: Bricks
 Congregation Beth Torah
 720 W Lookout Drive
 Richardson, Texas 75080

Your Name (Print) _____ Phone _____
 Address _____

STEP 1: Check the brick you want engraved:

_____ Patron Brick * (\$750) _____ Donor Brick (\$100)
 * The Patron Brick will be distinguished by size, color or placement in the landscape design. Patron Brick donors will receive a Certificate of Appreciation from Congregation Beth Torah.

STEP 2: Print the characters you want engraved in the boxes below. You may use any combination of letters and numbers. There is a maximum of 16 characters per line (a space counts as a character), four lines per brick.

Line 1	<input type="checkbox"/>
Line 2	<input type="checkbox"/>
Line 3	<input type="checkbox"/>
Line 4	<input type="checkbox"/>

STEP 3: Indicate method of payment. Full payment must accompany order for a Donor Brick (\$100). Payment for a Patron Brick (\$750) may be made over three consecutive months (\$250 to accompany the order, \$250 the following month, and \$250 the third month).

My check for \$ _____ is enclosed.

Please charge \$ _____ to my credit card (Visa or Mastercard).

Visa # _____ Mastercard # _____

Name on card _____ Exp. date _____

_____ (Patron Bricks only) I am paying \$250 now. Please bill me, or charge my credit card if so indicated above, \$250 a month for the next two months, for a total payment of \$750.