



Form for Yom Kippur BOOK OF REMEMBRANCE 5779 - 2018

We thank you in advance for supporting this time-honored custom of remembering our loved ones during the High Holy Days. We wish each of you good health and a good year.

The name of EACH person remembered **must** be listed on a separate line. The cost is **\$10.00 per individual name** you wish to list in our Book of Remembrance. This form and all payment must be **received no later than August 10, 2018**, to allow sufficient time for preparation and printing of the Books in time for the holiday. We ask that you **PLEASE PRINT ALL INFORMATION CLEARLY: Memorial Name, Relationship to you, and Your Name(s)**.

Please include your check payable to **Congregation L'Dor Va-Dor** and mail this form and check to:
Congregation L'Dor Va-Dor
P.O. Box 540784
Lake Worth, FL 33454-0784

HONORED BY: _____ **CONTACT PHONE NO:** _____ **EMAIL ADDRESS:** _____
(EXACTLY how you wish YOUR names to be printed)
(sample: Michelle & Michael Levi 954-222-1234 MML222@aol.com)

(1) _____

MEMORIAL NAME (Each name to be printed): **RELATIONSHIP** to YOU to be printed:

(sample: Rebecca Levi Grandmother)

(2) _____ (3) _____

Donation of \$10 per individual Memorial Name listed - Total \$: _____

(Please list any additional Memorial Names and Relationships on the back of this form or on separate paper.)