

**Temple B'nai Torah
DONATION FORM**

Donation \$ _____ Date _____

To (which fund) _____

- In Memory of _____
- In Honor of _____
- In Appreciation of _____

Name and Address of Donor: _____

Person to be Notified of Donation: _____

Acknowledgement Sent _____
TBT Times _____
Book Plate _____

For either the Rabbi's Discretionary Fund or Cantor's Discretionary Fund, please make your check payable to the fund; for all other fund donations, please make your check payable to
TEMPLE B'NAI TORAH.

Send to: Temple B'nai Torah, 2900 Jerusalem Avenue, Wantagh, NY 11793-2025

If you prefer to donate by credit card, please fill in your credit card information.

CHARGE CARD FORM (Minimum Credit Card Charge of \$150)

Name of Contributor _____ Phone _____

Address _____

Please charge my _____ Master Card _____ VISA Expiration Date _____

Credit Card Number _____

Signature of Card Holder _____