Congregation Or Hadash

Memorial Wall Tribute Brick Order Form

Please Use Separate Form for Each Tribute Brick

All COH members are eligible to reserve and purchase Memorial Tribute Bricks. This purchase is a tangible way to invest in COH and to remember your loved ones from generation-to-generation.

You are invited to take a look at our Memorial Wall for placement. Selection is by Row and Column #. There are three color choices in shades of blue (deep, medium, and light); aligned consecutively across the board. If after purchase you decide on a different location... this is acceptable as long as the new location is of same color and has not been reserved by another. The memorial brick is inscribed with the deceased name with its Hebrew translation, and date-of-death in English and Hebrew. Upon completion of this form, Rabbi Mario will review for accuracy prior to manufacturing.

Purchaser Name: _____ Date _____

Brick Example

Brick Location: Row: _____ Column: _____

Deceased Tribute Brick Detail

Color Choice: Deep Blue ☐ Medium Blue ☐ Light Blue ☐

English Name – First, Middle, and/or Maiden Name if desired

Hebrew Name – Including Parents' Names (i.e. Isaac ben Avraham and Sarah) …Rabbi will translate to Hebrew

Last Name

English and/or Hebrew Date of Death (must contain year): _____

If only the English DOD is known, please indicate if the death occurred before/after sunset.

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Brick Purchase

☐ I would like to purchase _____ Brick(s) at $756 each
☐ I would like to pay for this purchase in 3 monthly installments of $252 (per Brick)
☐ I would like to reserve _____ Brick(s) at $378 each
☐ I would like to pay for this purchase in 6 monthly installments of $126 (per Brick)

Payment Options

We accept Visa, Master Card and American Express

☐ Check Enclosed ☐ Credit Card ☐ Charge Card on File

Credit Card Information

Name as it appears on card: _____

Credit Card Type / and #: _____ / _____

Expiration / Security Code: _____ / _____

NOTE: A 2.5% processing fee will be imposed with your permission.

- I prefer to opt-out of the credit card fee ☐

Final Approval and Sign-Off

Purchaser/Congregant: _____ Rabbi: _____

Confirmed via email/fax

Date Sent to Awards Atlanta: _____ Date Returned: _____

Notify Purchaser of Receipt and Install

File (*with confirmation*)