

Donation Form	
From:	
Name:	
Address:	
Tribute: (circle one) In honor of/appreciation	on of/ memory of/ none:
Donation Amount \$	
\square I wish to give this gift anonymously.	
Apply this contribution to the following	fund: (Check box)
Annual Chai Fund	Library Fund
☐ Cantor's Discretionary Fund	☐ Prayer Book Fund
☐ Forman-Blumenthal Family	Rabbi's Discretionary Fund
Scholarship Fund for Jewish Education	☐ Yahrzeit Fund
☐ High Holiday Fund	
Payment:	
Please make checks payable to Temple Sh to contribute by credit card, fill in below	• •
Exact Name as it appears on card:	
Type of Card: MasterCard ☐ Visa ☐ Dis	scover
Card #: Ex	piration Date:Security Code:
Please send acknowledgement to (option	nal):
Name:	
Address:	

Thank You!

Temple Shir Tikvah 34 Vine Street Winchester, MA 01890 Updated 2/28/2023

www.shir-tikvah.org (781) 729-1263 office@shir-tikvah.org