“In the beginning of the year and when it ends, we remember them...
When we have joys we yearn to share, we remember them...
So long as we live, they too shall live, for they are now a part of us, as we remember them.”
(From Yom Kippur Memorial Service liturgy)

Yahrzeit Plaques are a Permanent Memorial to a Loved One

In keeping with Jewish tradition, we observe the anniversary of a loved one’s death. While our loved ones live on in our memories, we can also honor them with a tangible memorial. A Yahrzeit Plaque is a permanent reminder of the place they held in our lives. Their names will be read on the anniversary of their death and the Yahrzeit Plaques are displayed throughout the year on the Memorial Wall outside of the Leebov Sanctuary. It is appropriate to remember your loved ones with a Yahrzeit Plaque if you have converted to Judaism or if you are not Jewish, but are part of our “Family of Families.”

The contribution for a Yahrzeit Plaque is $300. You will be notified when the plaque is received at Temple Sinai. Arrangements for a dedication of the plaque can be made at that time.

Contact Judy Lynn Aiello at (412) 421-9715 ext. 124 or JudyLynn@TempleSinaiPGH.org for more information.

Please use a separate form for each order.

Name of the Deceased ______________________________ Date of Death ______________________________

ORDERED BY

Name ______________________________ Relationship to Deceased ______________________________

Phone ______________________________ Email ______________________________

Address __________________________________________________________________________________

City/State/Zip _____________________________________________________________________________

Payment Options:

☐ Enclosed via check made payable to Temple Sinai

☐ Credit Card (see below)

Credit Card Information: ☐ YES, I want to donate my credit card’s processing fee to Temple Sinai.

Name on card: ____________________________________________________________

Card #: _____________________________ Exp: ___________ CVV: __________

Billing Address: __________________________________________________________

City: ______________________________ State: ___________ Zip: __________

Return completed form to Temple Sinai, 5505 Forbes Avenue, Pittsburgh, PA 15217.