



Oneg Selections Form

Bar/Bat Mitzvah Date: _____

Name of Bar/Bat Mitzvah: _____

Name(s) of Parent(s): _____

_____ I/We would like to sponsor the **Sisterhood oneg.** **\$180***

*Please make check out to Temple Shalom with Oneg and date in the subject line.

Name(s) for recognition _____

This form is due with payment one month before your Bar/Bat Mitzvah. Return to Clergy Assistant, Anne Maner, in the Temple office. Please email amaner@naplestemple.org or call 239-455-3030 with questions.