



Congregation Arzei Darom

725 Queen Anne Road • Teaneck NJ 07666 • info@arzeidarom.org • 201-416-9829

MEMORIAL PLAQUE ORDER FORM

(NOTE: PLEASE USE ONE COPY OF THIS FORM FOR EACH PLAQUE)

Name of Deceased: _____
Full Name, in English (print clearly)

Name of Deceased: _____
Full Name, in Hebrew (print clearly)
Example: רבקה בת אברהם or יעקב בן אברהם

Date of Death:
English Month/Day/Year: _____

Hebrew Month/Day/Year: _____

Name of person purchasing plaque: _____

Relationship to Deceased: _____

Address: _____

Yahrzeit Notices to be mailed to the following:
(In addition to above)

1. _____
Name Address Relationship to Deceased

2. _____
Name Address Relationship to Deceased

MEMORIAL PLAQUE PRICES:	
Full Members:	\$350 each
Associate Members:	\$395 each
Non-Members:	\$425 each

Please return form(s) with check made payable to Arzei Darom to:

Arzei Darom
c/o Yahrzeit Memorial Plaques
725 Queen Anne Road
Teaneck, NJ 07666

To pay by VISA or MasterCard:

Name as it appears on Card: _____ Expiration Date: _____

Credit Card Number: _____ CVV: _____