

Memorial Plaque Order Form

MEMBER NAME: _____

PHONE: _____ E-MAIL: _____

Total Plaques requested (information worksheet on page 2)

_____ @ \$720 per plaque

Total Amount Due _____

CHECK IS ENCLOSED CHECK NUMBER _____ CHECK AMOUNT _____

PLEASE CHARGE MY CREDIT CARD (fill in info below or call 212-452-2310 x12 or x10)

NAME ON CARD _____

BILLING ADDRESS _____

CARD TYPE: _____ VISA _____ MASTERCARD _____ DISCOVER _____ AMERICAN EXPRESS

CARD NUMBER _____

SECURITY CODE _____ EXPIRATION DATE _____

SIGNATURE: _____

****PLEASE NOTE: PAYMENT IN FULL MUST BE MADE AT TIME OF ORDER
OR YOU MAY ARRANGE A MULTIPLE PAYMENT PLAN WITH THE EXECUTIVE DIRECTOR***

Return completed form with payment to:

Congregation Or Zarua
127 East 82nd St.
New York, NY 10028
FAX: (212) 452-2103

Please contact Helene Santo
with any questions,
hsanto@orzarua.org

----- DO NOT WRITE BELOW THIS LINE -----

RECEIVED DATE: _____

DATE IN CHAVERWARE _____

DATE ORDERED: _____

DATE INSTALLED: _____

DATE PROOF APPROVED: _____



Memorial Plaque Information Worksheet

As you complete the worksheet, please note the following:

- Be sure to print clearly! Please use a separate sheet if necessary.
- Contact Rabbi Bolton for assistance with Hebrew names: (212) 452-2310 x12 or rabbibolton@orzarua.org
- Check the “reserved” box for family/friends not yet deceased
- If you prefer specific plaques to remain oriented in a group, please indicate as a cluster in the section below
- Indicate if you have a preference for the north armature, south armature, or no preference

ENGLISH NAME _____ Reserved
PLEASE PRINT

HEBREW NAME: _____
USE HEBREW OR ENGLISH LETTERS

LOCATION PREFERENCE: North Armature South Armature No Preference

ENGLISH NAME _____ Reserved
PLEASE PRINT

HEBREW NAME: _____
USE HEBREW OR ENGLISH LETTERS

LOCATION PREFERENCE: North Armature South Armature No Preference

ENGLISH NAME _____ Reserved
PLEASE PRINT

HEBREW NAME: _____
USE HEBREW OR ENGLISH LETTERS

LOCATION PREFERENCE: North Armature South Armature No Preference

ENGLISH NAME _____ Reserved
PLEASE PRINT

HEBREW NAME: _____
USE HEBREW OR ENGLISH LETTERS

LOCATION PREFERENCE: North Armature South Armature No Preference

COMPLETE THIS SECTION ONLY IF YOU ARE INTERESTED IN KEEPING A GROUP OF PLAQUES TOGETHER

Print English Names. Up to FOUR plaques can be oriented together. Please use a separate sheet if necessary.

1.	
2.	
3.	
4.	