

# **Temple Sinai** of Palm Beach County **A Leaf on "Tree of Life" Order Form**

**NAME OF DONOR**

☐ Member ☐ Non-Member

Date: \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_ Fax \_\_\_\_\_ ☐ I wish to remain an anonymous donor.

Payment: ☐ Check # \_\_\_\_\_ ☐ Credit Card ☐ Cash \$ \_\_\_\_\_

\_\_\_\_\_ AMEX \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_ Discover

Name on Credit Card \_\_\_\_\_ CC # \_\_\_\_\_

Security Code \_\_\_\_\_ Signature: \_\_\_\_\_ Exp. Date \_\_\_\_\_

## **IN HONOR OF:**

- ☐ Bar/Bat Mitzvah ☐ Wedding ☐ Birthday  
☐ Anniversary ☐ Well Wishes ☐ Birth  
☐ Thank You ☐ A Friend ☐ Graduation  
☐ \_\_\_\_\_

- CHECK:** by Mail, or submit in Temple Office  
Check Payable to: **Temple Sinai**
- CASH ONLY:** submit in temple office.
- CREDIT CARD BY PHONE:**  
call 561-276-6161 (ext. 123, 112).
- CREDIT CARD BY FAX:** 561-276-3485.
- CREDIT CARD IN PERSON:** temple office

## **CREATE YOUR OWN INSCRIPTION: (please print clearly)**

- ☐ \$99 - 4 lines, 19 characters and spaces per line.  
 (\$10 OFF each additional leaf).

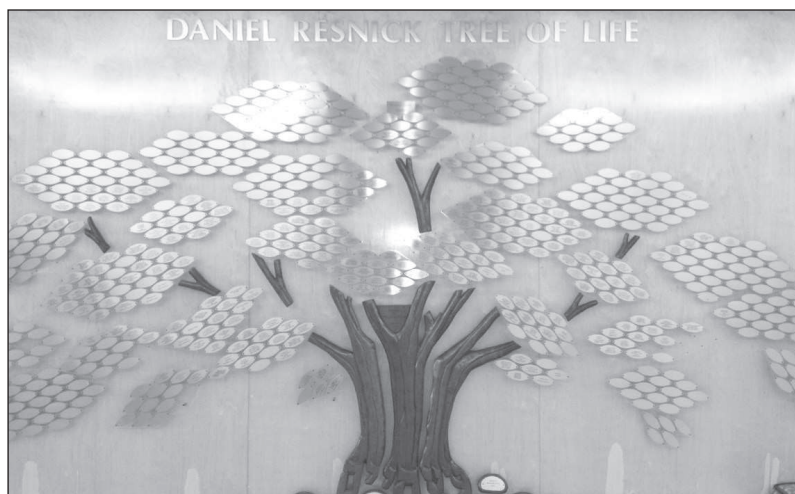
Indicate, if you would like to specify Leaf Location:

\_\_\_\_ Yes (contact temple office) \_\_\_\_ No

For Office Use

Leaf Location: \_\_\_\_\_

1.																			
2.																			
3.																			
4.																			



**Temple Sinai of Palm Beach County**  
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