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**KIDDUSH**

**SPONSORSHIP**

If you would like to sponsor a Saturday Kiddush please fill out the form below and return it to the

Jewish Community Center of LBI along with a check made payable to JCC of LBI

**Jewish Community Center of LBI**

**2411 Long Beach Blvd.**

**Spray Beach, NJ 08008**

**Any questions please Contact Lynn Berkowitz through the office at 609-492-4090**

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**Yes, I/we would like to sponsor a Saturday Morning Kiddush \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date)**

**\_\_\_\_$150 minimum contribution**

**\_\_\_\_$350 Tuna salad, Egg salad & Whitefish platter**

**2 kinds of cream cheese**

**2 Salads – Health & Israeli**

**Bagels**

**Cookies & Cake tray or 1 Fruits & Cookie tray**

**\_\_\_\_$500 Tuna salad, Egg salad, Whitefish & Lox platter**

**2 kinds of cream cheese**

**2 Salads – Health & Israeli**

**Bagels**

**Cookies & Cake tray or 1 Fruits & Cookie tray**

**Celebration cake**

**$\_\_\_\_\_ Other**

**(Payment must be received in advance of the date)**

* **Printed acknowledgement on the Kiddush table, in**

**the Shabbat Flyer and JCC bulletin.**

* **Verbal, public acknowledgement (thank you)**

**from the bimah during services.**

**Enclosed is my/our check for $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**We are sponsoring this Kiddush in celebration of:**

\_\_\_\_\_Anniversary of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Baby naming of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Bar/Bat Mitzvah of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Birthday of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Engagement/wedding of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_In memory of, or to mark the yahrzeit of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Other, specify: graduation, safe return, recovery, honoring a

teacher, etc. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information:

Name(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_