

# TEMPLE ISRAEL SISTERHOOD DONOR DINNER 2015

This is an opportunity to share messages of joy about life cycle events and loved ones and to honor the memory of a beloved family member or friend in our Donor Dinner Booklet. Each category is valued at \$8.00

## In Loving Memory

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Simcha (s)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Well Wishes

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Our Children

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Young Adults

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Our Parents

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Pets

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Bar/Bat Mitzvah

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Our Professional Friends

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## Our Grandchildren

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## College Men & Women ( include schools)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Your Name \_\_\_\_\_

Phone # \_\_\_\_\_

*Please mail this completed form and your check (made payable to Sisterhood of Temple Israel) to:*

*Sheryl Katzman  
224 Hartford Street  
Westwood, MA 02090*

*Forms must be received by May 14, 2015.*

*Thank you for your support.*