



**MEMBER/NON MEMBER
YIZKOR BOOK OF REMEMBRANCE
2025/5786)**

A Yizkor Book of Remembrance will be published on Yom Kippur. If you wish to include the names of your loved ones, family and friends, please complete this form (front and back) and send it with the appropriate contribution to the Temple office.

Listings will be printed as follows:

<i>In Memory of</i>	<i>Remembered by</i>
John Doe	Sam & Sue Doe
Jane Doe	<u>(Max. 30 characters, including spaces)</u>
Ann Jones	

(ONE name per line)

	<u>Members</u>	<u>Non-Members</u>
Each name remembered (1-5 names)	\$11.00	\$15.00
A half page (1-12 names)	\$65.00	\$80.00
A full page (1-18 names)	\$75.00	\$90.00

Please indicate "Yizkor Book" on your check.

FORMS AND CONTRIBUTIONS MUST BE RECEIVED BY August 15, 2025.

***** ANY FORMS AND CONTRIBUTIONS RECEIVED AFTER THIS DATE WILL BE RETURNED *****

(Please Print Clearly)

Name: _____

Address:

City, State, Zip Code: _____

Phone Number:

Enclosed is my contribution of \$ _____

Mail to: Yizkor BOOK OF REMEMBRANCE
Temple Beth El Israel
551 SW Bethany Dr.
Port St. Lucie, FL 34986

For Office Use Only

Date Received: _____

Amount Received: _____

Check Number: _____

054050

\$90.00 (non-member)

In memory of

Remembered by

\$80.00 (non-member)

In memory of

Remembered by

1. PRINT or TYPE ALL INFORMATION:

6. Mail this form and your contribution to the Temple BY August 15, 2025.

NO EXCEPTIONS

Individual listing (1-5 names) (member)

$$(\text{\# of names}) \times \$11.00 =$$

Individual listing (1-5 names) (non-member)

(# of names)
x \$15.00 =

In memory of

Remembered by

In memory of