



בית הבנסת "בית שלום"
Temple Beth Sholom

208 Madrona Street • Chula Vista, California 91910
(619) 420-6040

Name _____

Street Address _____

City, State, Zip Code _____

Telephone (Home/Work/Cell) _____ Email _____

KOL NIDRE PLEDGE

Amount of Pledge: \$ _____

In Memory of/In Honor of _____

(Circle your choice of Announcement)

Announce my name Yes/No Announce the amount of my pledge Yes/No

YIZKOR MEMORIAL PLEDGE

Please include the following names in the Yizkor Memorial Book.

Name _____ Donation \$ _____

Name _____ Donation \$ _____

Total Enclosed \$ _____

Please Bill Me _____

Charge to my credit card _____ Visa _____ MasterCard Card Number _____

Amount to be charged \$ _____ Name on Card _____

Credit Card Verification Number _____ Signature _____

Billing Address _____ Zip Code _____