



Yahrtzeit Plaque Order Form

Person being remembered (check fields desired):

English Name: _____

Hebrew Name: _____ ben/bat _____
Parent 1 Parent 2

Secular Calendar Date of Death: _____

Approximate time of death: _____ (pre or post sundown)

Hebrew Calendar Date: _____

If you wish to use the Hebrew date to be included, but don't know it, check the box and we will look up the date for you based on the secular date.

Member Placing the order:

Name: _____

Address: _____

City-State-Zip: _____

Phone: _____ Email: _____

Payment Information (check one)

The cost is \$180 per plaque. Each plaque can remember only one person.
Payment must accompany the order form.

Check (enclosed)

Credit Card (Visa/ Mastercard/ Discover)

Number: _____

Name of Card Holder: _____

Expiration Date: _____

If you wish to order multiple plaques, please include information for additional remembered people on another sheet of paper.

**Return forms to the Temple office at
P.O. Box 88 Damascus, MD 20872 or
email to orchadashadmin@gmail.com.**

