

**CONGREGATION SHAAREY ZEDEK  
5783 YIZKOR BOOK REMEMBRANCES**

**Family Name:** (as it will be printed in the book). Please print clearly. Thank you

Please renew my listing from last year

Please print the names of loved ones to be memorialized

*Names will be printed in the order listed. Please use reverse side for additional names*

- |          |           |
|----------|-----------|
| 1. _____ | 6. _____  |
| 2. _____ | 7. _____  |
| 3. _____ | 8. _____  |
| 4. _____ | 9. _____  |
| 5. _____ | 10. _____ |

**PRICING TABLE**

1 name .....	\$18	6 names .....	\$108
2 names .....	\$36	7 names .....	\$126
3 names .....	\$54	8 names .....	\$144
4 names .....	\$72	9 names .....	\$162
5 names .....	\$90	10 names .....	\$180

I have enclosed a check for \$\_\_\_\_\_ (\$18 per name), payable to Congregation Shaarey Zedek

Please charge my:     Visa     Mastercard

Account Number: \_\_\_\_\_

Security Code: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**Please return this form no later than Friday, July 15, 2021 along with payment, to  
Congregation Shaarey Zedek - Attn: Yizkor Book  
27375 Bell Road, Southfield, Michigan 48034**