



Donor Name: _____ Date: _____
 Address: _____
 City/State: _____ Zip: _____

Donations will be acknowledged in our monthly newsletter and are tax deductible	
Contributions of Any Amount	
General Fund	Education Enrichment Fund
Rabbi's Discretionary Fund	Music Fund
Cantor's Discretionary Fund	Rabbi Burstein Memorial - Scholar
Caring Fund	in Residence Fund
Early Childhood Center Fund	Youth Program Scholarships
Contributions of Designated Amounts	
\$54 HHD Prayer Book	\$360 Memorial Board Plaque
\$180 Sponsor an Oneg Shabbat	\$180 Leaf on Tree of Life
Fund: _____	Amount: _____
In Honor/Memory Of (circle one): _____	
On the Occasion of: _____	
In addition to the donor, please send an acknowledgment to:	
Name: _____	
Address: _____	
City/State: _____	Zip: _____
Fund: _____	Amount: _____
In Honor/Memory Of (circle one): _____	
On the Occasion of: _____	
In addition to the donor, please send an acknowledgment to:	
Name: _____	
Address: _____	
City/State: _____	Zip: _____
Fund: _____	Amount: _____
In Honor/Memory Of (circle one): _____	
On the Occasion of: _____	
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Name: _____	
Address: _____	
City/State: _____	Zip: _____

Make checks payable to "Congregation Shir Shalom" and mail with this form to:
 Congregation Shir Shalom, 46 Peaceable Street, Ridgefield, CT 06877
THANK YOU FOR YOUR GENEROUS SUPPORT OF CONGREGATION SHIR SHALOM!