

I/we would like to make a donation to one of Emanuel's funds:

Name _____ Address _____

City, State, Zip _____ Phone _____

Please make my donation to the following fund: ___ General Fund ___ Yahrzeit Fund
___ Rabbi's Discretionary Fund ___ Cantor's Discretionary Fund ___ Education Fund
___ Other, please specify _____

___ **Please have the Rabbi contact me**

My donation is ___ in memory of ___ in honor of _____

___ Please notify (minimum \$10): _____

Address _____ City, State, Zip _____

___ **Please charge my Visa or MasterCard** (minimum \$25)

Account # _____ Exp. Date _____

Signature _____

___ **My check for \$_____ is enclosed.**

Please make your check payable to: Emanuel Congregation.



**EMANUEL
CONGREGATION**

A member of the Union for Reform Judaism

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