

**TEMPLE BETH EL WEEKEND & MONTHLY SHABBAT
SPONSORSHIP FORM**

Name(s): _____

I/We wish to be a Weekend Shabbat Sponsor on the following weekend(s):

1. Weekend Date: _____ \$100

This weekend sponsorship is in honor (or memory) of: _____

2. Weekend Date: _____ \$100

This weekend sponsorship is in honor (or memory) of: _____

I/We wish to be a Monthly Shabbat Sponsor during the following month(s):

1. Month: _____ \$250

This monthly sponsorship is in honor or memory of: _____

2. Month: _____ \$250

This monthly sponsorship is in honor or memory of: _____

Your sponsorship and occasion will be highlighted in the newsletter and announced from the Bima on Shabbat. Please “**check only**” if you do **NOT** wish to be listed in the newsletter _____, email _____ or announced from the Bima _____.

Thank you for supporting this wonderful Beth El tradition. Contact Rich Repkoe in the Temple office at office@belancaster.org if you have any questions.

Please mail in form and remember to use our new mailing address:

**Temple Beth El Lancaster
PO BOX 727
East Petersburg PA
17520-0727**