

MEMORIAL PLAQUE ORDER FORM

Temple Beth-El, 3980 Sonoma Springs Ave, Las Cruces NM 88011 (575) 524-3380

Temple Beth-El's point of contact for ordering Tree of Life leaves is Julie Seton.

Email: julie.seton2@gmail.com Phone: 575-642-3946 (If no answer, please leave a message. Your call will be returned as soon as possible).

If you wish to mail it, please find Julie's mailing address in the Temple directory.

PLEASE COMPLETE A FORM FOR **EACH LEAF** YOU WISH TO PURCHASE

Customer (Person Ordering Plaque) Contact Information

NAME _____

EMAIL _____ PHONE _____

MEMBER OF TEMPLE BETH-EL? ___ YES ___ NO

The leaf size is 2" x 10" with approximately 1/2" border. Up to four lines of text. **Note: The more text you have, the smaller the font will be.**

Please design your plaque and send the design via email to Julie Seton (julie.seton2@gmail.com) as a .pdf or .docx file. The design worksheet and Hebrew lettering chart are on the next page. Please print legibly and choose a font style for each line with English letters and specify capitalization.

If you have any questions, contact Julie. Below is a basic example (not to scale).

FIRST, MIDDLE, and LAST NAME	
Hebrew Name	
Words or Date (English)	Words or Date (Hebrew)
Words or Date (English)	Words or Date (Hebrew)

COST and PAYMENT: **Member Cost: \$360.00 / Non-Member Cost: \$660.00.**

Payment is due upon ordering to **Temple Beth-El** (credit card or check). Money goes directly to the Temple electronically or by regular mail. See payment address information at the top of the page. Julie will not collect any money.

Once payment is confirmed, Julie will send the order to the vendor at the appropriate time. Pre-orders are accepted **with payment** and a spot on the Memorial Board will be reserved. The order will not be sent to the vendor until after the person's death.

When your plaque arrives, Julie will contact you to discuss installation details.

Contact the Spiritual Leader at the Temple if you wish to have an installation ceremony.

_____ Date Order Initiated _____ Date Payment Confirmed _____ Date Sent to Vendor
_____ Date Plaque Received _____ Date Customer Notified _____ Date Installed

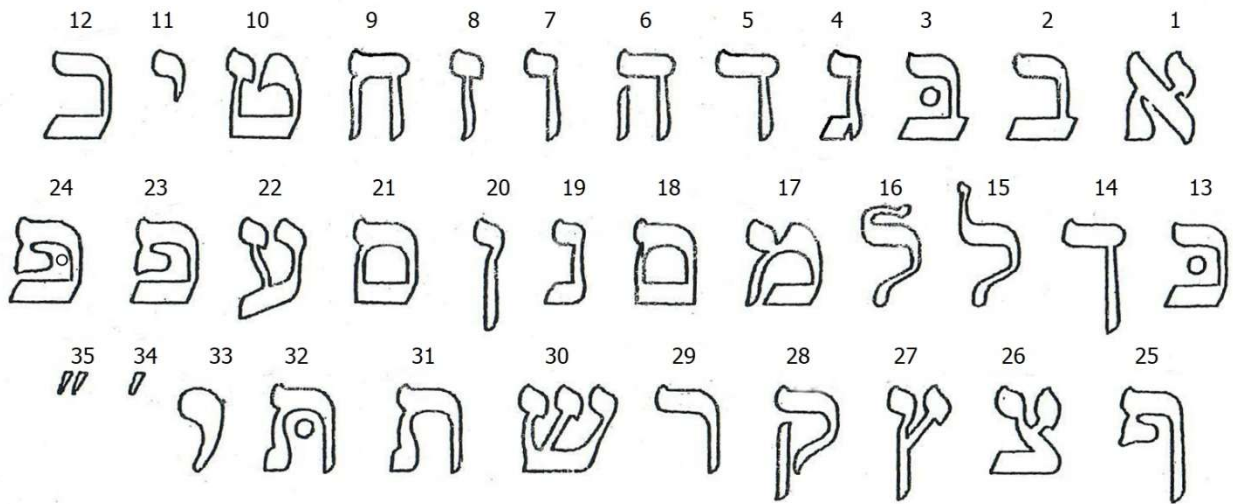
LETTERING WORKSHEET

Print this worksheet if needed to create your design.

Please write legibly, with desired capitalization and spelling. Select the font style you want for each line.

Customer Name _____

Name on Plaque _____



LINE 1: <input type="checkbox"/> serif <input type="checkbox"/> sans serif <input type="checkbox"/> italics
LINE 2: <input type="checkbox"/> serif <input type="checkbox"/> sans serif <input type="checkbox"/> italics
LINE 3: <input type="checkbox"/> serif <input type="checkbox"/> sans serif <input type="checkbox"/> italics
LINE 4: <input type="checkbox"/> serif <input type="checkbox"/> sans serif <input type="checkbox"/> italics

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