



# KANE STREET SYNAGOGUE

236 KANE STREET, BROOKLYN, NY 11231 TEL 718-875-1550 FAX 718-797-1152 www.kanestreet.org

## DONATION FORM

Name \_\_\_\_\_

Address \_\_\_\_\_ Apt.# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

I / We would like to make a contribution of \$\_\_\_\_\_ to be allocated for the following Kane Street Synagogue fund.  
Donations will be applied to the General Fund unless noted below.

- Capital Fund                       Torah Fund                       Book Fund                       Hebrew School Fund
- Pre-school Fund                       Yahrzeit Fund                       Garden Fund                       other \_\_\_\_\_

This contribution is in honor / memory of: \_\_\_\_\_

On the occasion of: \_\_\_\_\_

\_\_\_\_\_

Please send an acknowledgement of this contribution to:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I enclose a check payable to Kane Street Synagogue

Charge my:  Visa  Mastercard

Card # \_\_\_\_\_ Exp.Date \_\_\_\_\_

Signature \_\_\_\_\_

Historic Kane Street Synagogue appreciates gifts of any amount.

THANK YOU FOR YOUR DONATION