

**Yes! I want to support Beit Rabban. I am pleased to make a gift in the amount of:**

- \$36 – Challah baking supplies
- \$60 – School trip subsidies for two children
- \$100 – Session with a learning specialist
- \$350 – Classroom materials for one child
- \$750 – Professional development for one teacher
- Other: \_\_\_\_\_

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Your Name

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Address

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City

State

Zip

*Gift made in honor/memory of:* \_\_\_\_\_

*Please send an acknowledgement to:*

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Name

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Address

---

City

State

Zip

*Enclose your check made payable to **Beit Rabban** OR charge (Mastercard/Visa) in the amount of: \$:* \_\_\_\_\_

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Credit card number

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Exp. Date

Security code (3 digit code on back of card)

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Cardholder's Name

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Billing Address (if different than above)

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Signature

Return this form with your contribution to:

Development Office  
Beit Rabban  
8 W. 70<sup>th</sup> Street  
New York, NY 10023

**THANK YOU FOR YOUR GENEROUS SUPPORT!**