

Yahrtzeit Board ...... Reserved



## **Building Campaign Pledge Card**

Make this Center Your Legacy by Selecting from Below.

## **Building Dedications** Sanctuary Dedications (cont'd) Campus ......\$1,000,000 Ner Tamid (Eternal Light) ...... Reserved Prayerbook Cabinets (3 available) .....\$10,000 Stained Windows ...... Reserved Kiyor (Hand Washing Basin) ...... Reserved Amud (Cantors Stand)...... Reserved Mikvah - Purifying Water..... Reserved Rabbi's Lectern......Reserved Library/book......\$100,000 Kippah Station.....\$10,000 Teen Lounge .......\$100,000 Tzedakah/Charity Box ...... Reserved Playground ......\$75,000 Mezuzos (17 available) ......\$5,000 Landscaping......\$75,000 Classroom Dedication (4 available).....\$50,000 Tables (sets of 5) ......\$5000 Rabbi's Study...... Reserved Administrative Office Center ......\$50,000 Grand Donors Wall ......\$50,000 Mikvah Dedications Individual Offices (3 available) .....\$25,000 Mikvah Room ...... Reserved Elevator.......\$25.000 ☐ Women's Mikvah Pool .......\$18,000 Security System ......\$25,000 Lobby & Reception Area ......\$18,000 Women's Preparation Room......\$10,000 Coat Room ......\$18,000 Mikvah Furnishings......\$10,000 Audio-Visual System.....\$18,000 ☐ Kiyor Washing Station ...... \$5000 Mission Statement Plaque .....\$10,000 Library Mezuzah......\$10,000 **Sanctuary Dedications General Dedications** Sanctuary ...... Reserved Lamplighter......\$50,000 Aron Kodesh...... Reserved Beacon.....\$25,000 Bimah...... Reserved Duchan Stage...... Reserved Torch......\$18,000 Synagogue Mezuzah ...... Reserved Flame......\$5,000 Mechitzah.....Reserved

Light......\$1,000

## **PLEDGE INFORMATION**

In support of Chabad's Building	g Campaign, I/we pledge	· \$				
Donor:				☐ I wish my	y gift to remain anonymous.	
As	you would like to appear for re	ecognition				
	*Gifts may be pledo	ged over a period o	of one to three	years.		
First name:	Last Name:		_ln honor/men	r/memory of:		
Address:		City:		State:	Zip:	
E-mail:				Phone:		
		<b></b>				
	B	NO INFORM	ATION			
	BILLI	NG INFORM	ATION			
Check to Chabad of Gwinnett E	Building Campaign 🔲	Credit Card	Stock			
My gift in full, on date						
My gift over a period of	years.*					
☐ Annually ☐ Monthly \$	beg	inning on:				
Billing address if different from	n donor address:					
First name:		Last Nan	ne:			
Address:						
Credit card number:		Expiration date:				
Signature:		Date:		_(Signature re	equired to authorize pledge)	

## **RETURN COMPLETED FORM TO:**

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