

ISRAEL CRISIS RELIEF FUND CONTRIBUTION FORM

Please fill out all the information below:

Donor (s): WHC Member: Yes No

Name: _____

Address: _____

Tel. Number: _____

My/Our contribution to Washington Hebrew Congregation's Israel Crisis Relief Fund is:

\$500 \$250 \$100 \$ _____

Please circle one: Bill Account Check Enclosed

Additional information/comments:

Signature: _____ Date: _____

Please return this form and your check to Washington Hebrew Congregation, 3935 Macomb Street, NW, Washington, DC 20016, Attn: Israel Crisis Relief Fund.