

OPERATION MAZAL TOV: ORDER FORM
Bar/Bat Mitzvah Program for Israeli Children with Special Needs

PLEASE PRINT OUT THIS FORM, AND SEND YOUR ORDER TO:

The Masorti Foundation
Att: Operation Mazal Tov
475 Riverside Drive, Suite 832
New York, New York 10115

From: Name (Synagogue Professional) _____

Synagogue _____

Address _____

City, State, Zip _____

Phone _____

"OPEN A DOOR" - 7-minute presentation about *Operation Mazal Tov: The Bar/Bat Mitzvah Program for Children with Special Needs in Israel*

Videotape or

CD

COLOR FLIER: *Bar/Bat Mitzvah Program for Children with Special Needs*

Flier _____ Number needed for students/parents

CONTRIBUTION FORMS in quantity must be copied from the sample provided.

Check here if you need a replacement form and we will be happy to send it to you.

Gifts are tax-deductible to the full extent permitted by law. Donate by phone toll-free at 1.877.287.7414 or online at info@masorti.org or mail to address above