



**Congregation  
Beth Hamedresh - Beth Israel**

## **Yizkor Book 2024-25**

Dear Friends,

Congregation Beth Hamedresh–Beth Israel will be publishing our annual Yizkor Memorial Book for use during the upcoming year’s Yom Kippur, Sukkot, Pesach and Shavuot services. We use this book in place of the prayer book for each of the Yizkor services throughout the year. Our book will contain the Yizkor service, special readings, prayers, Kaddish, and a memorial list of our dearly departed. Having your loved ones included in the Yizkor Book is a dignified way of remembering and paying tribute to those who have been called to their eternal rest.

To have your relatives and friends listed in the Memoriam, **please complete the form on the back of this letter and return it by September 13<sup>th</sup> to:**

Yizkor Book  
Congregation Beth Hamedresh – Beth Israel  
P.O. Box 20891  
Rochester, NY 14602

Note, this is the shul’s new P.O. Box address and *not* the synagogue’s street address!

**All listings must be prepaid. Listings not prepaid by press time will not be published.**

One, two or three names will be priced at \$18.00 (the number corresponding to Chai, the Hebrew word for life). Additional names, beyond the first three, are \$5.00 each name. Please print the names clearly since they will appear in the Yizkor Book exactly as you submit them.

The booklets will be available at BHBI services.

Regards,  
Steve



**Congregation  
Beth Hamedresh - Beth Israel**

**Yizkor Book 2024-25**

The format of the Yizkor Book is as follows:

**Remembered by**

**In Loving Memory of**

\_\_\_\_\_  
Please print your name or names as you wish it/them to appear in this book

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Print each name you want listed on a separate line. Example: Abraham and Sarah Person should be written on 2 lines, as they represent 2 names and 2 listings in our book. DO NOT use Mr/Mrs/Ms/Dr.; just first and last names. Titles will not appear in the Yizkor Book. Remember to print the names clearly since they will appear in the Yizkor Book exactly as you print them. Add additional pages if needed.

**PLEASE RETURN THIS FORM TO BHBI BY SEPTEMBER 13, 2024**  
**Checks payable to Congregation Beth Hamedresh – Beth Israel**

Rates: \$18 for one, two or three names. Each additional listing beyond three is \$5

Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

Number of names listed \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

**Please send this form along with payment to:**

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Congregation Beth Hamedresh – Beth Israel  
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For office use only

Payment Received

Names entered in Book

Date: \_\_\_\_\_