

Order Form For Plaques In Yad Vashem's Memorial Cave

The following information describes how to order a plaque. Section C is a Plaque Form to assist in the wording of your plaque. Please call 0450 603 703 if you have any queries.

A. Your Contact Information (Please complete and send with your Plaque Form)

NAME:

ADDRESS:

.....

E-MAIL:

FAX:

PHONE: (H) (W) (M)

B. Payment Options

1. Credit Card

Go to: <https://secure.yadvashem.org/donation/campaigns/2014/australia.asp>

Make your payment using the secure online facility

a) Date of payment:

b) Order amount: USD \$1,800 (30cmx30cm) \$2,500 (30cmx45cm) \$3,600 (30cmx60cm)
 \$4,500 (30cmx75cm) \$5,400 (30cmx90cm)

c) Name of purchaser appearing on the Credit Card:

2. Electronic Funds Transfer

ACCOUNT NAME:----- YAD VASHEM

BANK: ----- BANK LEUMI (10)

BRANCH:----- BEIT HAKEREM (903)

ADDRESS: ----- SDEROT HERZL 106, JERUSALEM, ISRAEL

ACCOUNT NUMBER: ----- 66899/33

SWIFT CODE: ----- LUMIILIT

IBAN: ----- IL54 0109 0300 0000 6689 933

Please complete the following details and send with your Plaque Form:

a) Date of electronic transfer:

b) Order amount: USD.....

c) Bank from which sent:

d) Name of purchaser appearing on the Electronic Transfer:.....

C. Plaque Form (If you create your own plaque wording try to keep it to 12 lines)

Note that all text will be produced in ALL CAPS.

SECTION A – Wording to commemorate those that died in the Holocaust

1. How would you like the wording to start [tick one selection only]:

IN LOVING MEMORY OF	<input type="checkbox"/>	
IN MEMORY OF	<input type="checkbox"/>	
IN EVERLASTING MEMORY OF	<input type="checkbox"/>	
WE SHALL NEVER FORGET	<input type="checkbox"/>	
IN MEMORY OF OUR DEARLY BELOVED	<input type="checkbox"/>	
Other (incl Hebrew if desired)	<input type="checkbox"/>	

2. People who died in the Holocaust that you would like to commemorate:

a. If you wish to name individuals fill in the details here
(Use Hebrew name if desired; * means optional detail);

Name	Family Name	Place of Birth *	Year of Birth *	Relationship *

b. **OR**, if you wish to refer to a family group, not individuals, fill in the family surname(s) here:

3. If you wish to mention where your family perished insert here (eg you may write 'The Holocaust', 'Auschwitz', a ghetto or other camp(s) * [* Optional]

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4. You may wish to add one of the following to finalise the commemoration [tick one selection only or leave blank if not required]:

ת.נ.צ.ב.ה	<input type="checkbox"/>	
MAY THEIR MEMORY BE A BLESSING	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

SECTION B – Wording for honouring a survivor of the Holocaust

5. Select one of the following “in honour of” if the survivor is alive or “In memory of” for a survivor who has died:

IN HONOUR OF	<input type="checkbox"/>	
IN MEMORY OF	<input type="checkbox"/>	
Other	<input type="checkbox"/>	

6. Fill in the details here of the survivors you wish to honour
(Use Hebrew name if desired; * means optional detail):

1 st Name	Family Name	Years of Birth (& Death) *	Relationship *	Country *

7. If you wish to mention the place of survival fill in the details here
(eg Auschwitz or other camp, ghetto or other circumstance):

SECTION C – Wording for the person(s) making this Dedication

8. DEDICATED BY:

9. If you wish to add Additional Text do so here:

SECTION D – If you wish to add instructions to Yad Vashem do so here or add and another page.
(You will be provided a version of your plaque for approval & can make changes at that time).

Please note again that the above form is a guideline for the wording of the plaque and you are not restricted to this format.