SHALACH MANOS ORDER FORM

Name:_____ Address:_____

Phone:_____ E-Mail_____

OPTIONS

!. JCC GARDEN SPONSOR----------$500. $_____

2. Please send to all Jewish Community Center

Members and employees - $136 $_____

3 Please select as many congregants, family or friends as you wish.

State their names on your list below.

Minimum Order 3 names = $54.00

Additional names _____@ $18 per name $_____

TOTAL AMOUNT ENCLOSED $_____

Please call the office with credit card information, or make check payable to JCC of LBI earmarked *"Shalach Manos".*

ORDER FORM WITH LIST AND CHECK MUST BE RETURNED

TO JCC OFFICE NO LATER THAN February 1st, 2026

Please mail to:

Jewish Community Center of LBI

2411 Long Beach Blvd

Spray Beach, NJ 08008

Att: Shalach Manos

Name_____

I DO NOT wish to receive a package this year_____

I only wish to send a package to the names below:

Name_____

Name_____

Name_____

Name_____

Name_____

Use a separate sheet for additional names