

**WILLAMETTE VALLEY JEWISH COMMUNITY BURIAL SOCIETY  
CORVALLIS CHAPTER FUNERAL ARRANGEMENTS**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

HEBREW NAME \_\_\_\_\_ son/daughter of \_\_\_\_\_

**CONTACT INFORMATION OF RELATIVE**

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Relationship \_\_\_\_\_

**BURIAL SOCIETY SERVICES DESIRED**

\_\_\_\_\_ *Toharah* - perform the ritual washing and purification

\_\_\_\_\_ *Shemirah* - provide for guarding of the deceased (*met/metah*)

\_\_\_\_\_ Coffin

\_\_\_\_\_ Plain pine coffin

\_\_\_\_\_ Other coffin

**BURIAL INFORMATION**

Burial Location \_\_\_\_\_

Plot. Block \_\_\_\_\_ Lot \_\_\_\_\_ Space \_\_\_\_\_

**FUNERAL SERVICE PREFERENCES**

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

**PLEASE RETURN TO ADDRESS BELOW ALONG WITH \$20 PROCESSING FEE**

**Beit Am**

Attn: Chevra Kaddisha

P.O. Box 1143

Corvallis OR 97339-1143