



NON-MEMBERS RESERVATION FORM

HIGH HOLY DAYS SERVICES, 5780 (2019)

We hope to see you for High Holy Days services this year! Please carefully review this form, complete all items below and return the form **by Friday, September 6, 2019** with payment in full. Please mail all forms to Congregation Beit Tikvah, 5802 Roland Avenue, Baltimore, MD 21210-1310. For general information, kindly contact our office at 410-464-9402 or info@beittikvah.org. For payment questions or arrangements, kindly contact our President at 410-464-9402 or president@beittikvah.org.

1 Contact information

Name _____ Email Address _____

Mailing Address (Street, City, State, and Zip Code) _____

Telephone Number _____

2 Suggested minimum donations for High Holy Days services

1st Adult: **\$180**

2nd Adult in the family, College Students, or Seniors (over 65): **\$100**

Please indicate the number of people attending each service:

___ Erev Rosh Hashanah (9/29) ___ Rosh Hashanah (9/30) ___ Kol Nidre (10/8) ___ Yom Kippur (10/9)

3 Names of all adults and children who will be in your group (include ages for children - age 12 & under)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total →	\$ _____

4 Additional reservations/donations

I/We wish to make an additional tax-deductible donation: \$36 \$54 \$72 \$100 Other _____ \$ _____

I/We wish to dedicate a prayer book (\$54) for the synagogue (*write dedication wording on a separate sheet*) \$ _____

Yizkor Book Payment (*see attached form*) \$ _____

Break Fast Meal (*enter number of attendees*): ___ Adults (\$15 each) ___ Children age 12 & under (free) \$ _____

Total amount due from section 3 and 4 above → \$ _____

I/We wish to receive membership information. *Please consider joining Beit Tikvah!*

5 Payment Options

To eliminate money handling during High Holy Days, donations are to be paid *in full and in advance* by **Friday, September 6, 2019**.

My total amount due, \$ _____ in 4 above, is paid by check (enclosed).

My total amount due, \$ _____ in 4 above, has been charged to my credit card online via PayPal at www.beittikvah.org/donate/. Please add 5% handling fee to any credit card payments. Indicate date that payment is made: _____

6 I am willing to do a reading at services: ___ in English ___ in Hebrew.