



# Beth Jacob Synagogue

AFFILIATED WITH THE UNITED SYNAGOGUE OF CONSERVATIVE JUDAISM

Founded 1886

375 Aberdeen Ave., Hamilton, Ontario, Canada L8P 2R7 Tel: 905.522.1351 Fax: 905.522.8410

## Seating Reservations – High Holidays 5780

Eve of Rosh Hashanah – Sunday, September 29, 2019

Kol Nidre Service on Eve of Yom Kippur – Tuesday, October 8, 2019

Please note that reservations cannot be considered unless this form is completed in full and returned to the Synagogue office by **August 16, 2018, with payment** in the form of your cheque(s), Visa or Mastercard Number (complete with expiry date – see below).

**Please note any changes to your name and address.**

**To ensure the timely arrival of your ticket(s) please return this form by August 16/2019**

Mail, Fax OR phone in to the synagogue OR e-mail to: **hhdseating@bethjacobsynagogue.ca**

**Please complete and return Pages 1 and 2 [Please PRINT]**

### Seating Rates are as follows:

- A. \_\_\_\_\_ seats for Members and Associate Members @ \$ 75 each \_\_\_\_\_
- \_\_\_\_\_ seats for **affiliated** Adult Children of Members @ \$ 75 each \_\_\_\_\_
- \_\_\_\_\_ seats for **un-affiliated** Adult Children of Members @ \$ 110 each \_\_\_\_\_
- \_\_\_\_\_ seats for Non Members @ \$ 150 each \_\_\_\_\_

B. \_\_\_\_\_ Our family will be attending ONLY the **Family Services** [\$36] (see page 2) \_\_\_\_\_

C. \_\_\_\_\_ Dedicated Mahzor @ \$36 each \_\_\_\_\_

To help underwrite High Holiday tickets for students and members of our community in need, I enclose an additional \_\_\_\_\_

TOTAL OWING \_\_\_\_\_

For Visa or MasterCard payments, please include the following: Name on credit card: \_\_\_\_\_

Visa/MC # \_\_\_\_\_ Expiry \_\_\_\_\_ Security number \_\_\_\_\_

**Those in financial arrears to the Synagogue will not receive tickets for seats unless satisfactory arrangements are in place.**

**CHILDREN:** Only children 18 and under, or those attending school full time, are to be counted in the “Members” category.

**Adult Children of Members** include all those over 18 who are not attending school full-time. **Affiliated Adult Children of Members** include only those who are full members in good standing at another Synagogue (please provide the name of the Synagogue under the column marked “Member of” on page 2). **Non-Members** include all those over 18 who are not attending school full time. **Non-Members**, and particularly **un-affiliated Adult Children of Members** who live in the Hamilton area, are strongly encouraged to consider taking out a personal membership. Membership has numerous benefits. Interested parties are asked to leave their names with the Synagogue Office for the Membership Committee.

**For Security Reasons Please Bring Your Tickets To High Holiday Services**

**A. Seating Information for 2019**

Name(s) of all attending	Age of children	For non-member attendees affiliated with another synagogue please indicate the name and location of the synagogue

**B. Family Service Programs**

**PLEASE NOTE:** for those families who do **not** purchase High Holiday seats in the main sanctuary the **cost to attend any or all of these programs is \$36.00 per family (two adults and children) (see page 1)**

\_\_\_ Our family will be attending the Family Service on Monday, September 30, 2019 (1st day Rosh Hashanah)

\_\_\_ Our family will be attending the Family Service on Tuesday, October 1, 2019 (2<sup>nd</sup> day Rosh Hashanah)

\_\_\_ Our family will be attending the Family Service on Wednesday, October 9, 2019 (Yom Kippur Day)

\_\_\_ Number of children who will be attending \_\_\_\_\_ Number of adults who will be attending

\_\_\_ Our family will need babysitting for Kol Nidre (evening October 8<sup>th</sup>) for \_\_\_\_\_ children

Names & ages of children needing babysitting: \_\_\_\_\_

**C. Mahzor dedication(s)**

Dedication 1	Dedication 2
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**FOR OFFICE USE ONLY:**

Cleared by \_\_\_\_\_  
**(Please print name & initial)**

Payment Processed \_\_\_\_\_

Held for Finance \_\_\_\_\_

2019 Final Seat Assignment \_\_\_\_\_