

# RESERVATIONS FOR HIGH HOLIDAY SEATS 2011 / 5772

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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

*Please indicate below the name of each person for whom a reservation is being made*

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

NAME: \_\_\_\_\_

**NUMBER OF MEN'S SEATS:** \_\_\_\_\_ **NUMBER OF WOMEN'S SEATS:** \_\_\_\_\_

*Please indicate below the name, age, and grade (as of 9/2011) of each child who will be attending our youth program*

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

NAME: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

**NUMBER OF CHILDREN ATTENDING YOUTH PROGRAM:** \_\_\_\_\_

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- FULL MEMBERS:** \$125.00 PER SEAT
  - ASSOCIATE MEMBERS:** \$150.00 PER SEAT
  - NON-MEMBERS:** \$175.00 PER SEAT
  - YOUTH PROGRAM:** \$36.00 PER CHILD (NO CHARGE FOR FULL MEMBERS)

TOTAL NUMBER OF SEATS \_\_\_\_\_ @ \$125 / \$150 / #175 PER SEAT: \$ \_\_\_\_\_

TOTAL YOUTH PROGRAM \_\_\_\_\_ @ \$36 PER CHILD \$ \_\_\_\_\_

**TOTAL ENCLOSED:** \$ \_\_\_\_\_

SEATING REQUEST: \_\_\_\_\_

Please mail this form and payments to:  
Shaare Tefillah  
c/o Eric Orgen  
1090 Lambert Road | Teaneck, NJ 07666

PAYMENT CAN BE MADE VIA CREDIT CARD BY VISITING OUR WEBSITE: [WWW.SHAARETEFILLAH.ORG](http://WWW.SHAARETEFILLAH.ORG)