



Congregation Beth David
HIGH HOLY DAYS TICKETS 2019

	Ticket Cost	Number of Tickets
FAMILY MEMBER(S): (Spouse/Partner & Dependent Children)	-0-	_____
INDIVIDUAL OR SINGLE PARENT MEMBER: (Member & Dependent Children)	-0-	_____
EXTENDED FAMILY: (Spouse, Adult Children, Siblings)	\$75/each	_____
NON-MEMBERS:	\$275/each	_____
	TICKET TOTAL:	_____
	\$ AMOUNT DUE:	_____

NAMES OF MEMBERS/CHILDREN ATTENDING:

**If additional space for names is needed, please contact info@congbethdavid.org.*

- Payment will be submitted via PayPal. I will mail in a check for total ticket amount.
 No amount due.

*To send a check, please mail to: **Congregation Beth David, PO Box 125, Amenia, NY 12501***