

Non Member High Holy Days Ticket Request Form

Temple Kol Tikvah 2017 / 5778

Please return by September 1, 2017

(Please print clearly)

Family Name: _____ First: _____

Address: _____ City: _____ Zip: _____

Phone: (home) _____ (cell) _____ Email: _____

Tickets

			Quantity	Total
Adult Tickets (23 – 69 years of age)	\$325	X	_____ =	\$_____
Young Adults (YAP - ages 19-35 years)	\$200	X	_____ =	\$_____
Children (ages 5 to 18 years)	\$200	X	_____ =	\$_____
Senior (70 years & older)	\$200	X	_____ =	\$_____
Total Ticket Payment:				\$_____

Yizkor Memorial Book

Our Yizkor Memorial Book honors the names of those who are no longer on this earth. The book includes name listings, yizkor prayers, along with poems and prose written by the Kol Tikvah Community. The book is distributed at Yizkor Services on Yom Kippur, Sukkot, Passover and Shavuot. If you would like to honor your loved ones by including their names, please list names below. There is a donation of \$36 for each name listed.

Name(s) of those being honored:

Remembered by: (If different from family name)

Total Yizkor Book Listings: \$36 X _____ (# of names) = \$_____

I am a disabled driver in need of a disabled parking space. I understand that disabled space is limited and will be granted on a first come, first serve basis.

Total including Tickets and Yizkor Memorial Book: \$_____

Check # _____ is enclosed or charge my VISA MASTERCARD AMEX

Credit Card Number: _____

Expiration Date: _____ CVV# _____

Signature: _____

All Services will be held at Temple Kol Tikvah,
except 2nd Day RH Outdoor Hike and Shabbat Shuvah at the Beach with Tashlich

Please return to by September 1, 2017

For questions or more information, please call 818-348-0670 ext. 214.



20400 Ventura Boulevard, Woodland Hills, California 91364

818 348 0670 Fax 818 348 1584 www.koltikvah.org

A Reform Congregation Affiliated with the Union for Reform Judaism