

# High Holy Days Ticket Request Form

Temple Kol Tikvah 2018 / 5779

Please return by August 31, 2018

(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 (19 - 35 years of age)	\$200	X	_____ =	\$_____
Children (ages 5 to 18 years)	\$200	X	_____ =	\$_____
Senior (70 years & older)	\$200	X	_____ =	\$_____
<b>Total Ticket Payment:</b>				<b>\$_____</b>

## 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 August 31, 2018

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



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A Reform Congregation Affiliated with the Union for Reform Judaism