Honors Sheet

Bar/Bat Mitzvah:_____

Parents: _____

Siblings: _____

Please provide the Hebrew & English name(s) for those chanting the Aliyot blessings & Hebrew name(s) of their parent(s) (ex. Yakov ben Sarah/Avraham or Rachael bat Leya/ Steven) **and also the name of the Torah chanter.**

1st Aliyah _____ben/bat_____ **English Name:** _____

_____ben/bat_____ **English Name:** _____

1st Torah chanter(English only)_____

****

2nd Aliyah _____ben/bat_____ **English Name:** _____

_____ben/bat_____ **English Name:** _____

2nd Torah chanter_____

****

3rd Aliyah _____ben/bat_____ **English Name:** _____

_____ben/bat_____ **English Name:** _____

3rd Torah chanter_____ _____

****

4th Aliyah / Maftir

Bar/BatMitzvah_____ben/bat_____

Hagbah (1 person to lift Torah- individual has to have prior experience/practice lifting on Fri. pm after services) Let us know if you would like us to assign.

Gelilah (1 person to wrap Torah)

_____

Gabayim (assist with Torah service) TBE will assign

Healing Prayer – (sung on Saturday) _____

Bima/Gift Presenter - TBE Board member - _____

Usher –At least 1 adult to hand out programs, ensure that kippot are worn in the sanctuary & assist w/seating _____

Ark Openings/Closings

Barechu (open) 1.

2.

Torah (beg- curtain) 1.

2.

Torah (end - curtain) 1.

2.

Alenu (close) 1.

2.