

SEPHARDIC CONGREGATION OF THE FIVE TOWNS

Membership and Seating Form (5781/2020)

Please complete this form and submit with your payment in full no later than one week prior to Rosh Hashana.

ACCOUNT BALANCES MUST BE PAID IN FULL WITH YOUR SEATING FORM SUBMISSION

Please Note: NO seating reservations will be accepted via email, fax or telephone calls. This form must be delivered to Ralph Benzaken together with the appropriate check(s).

PLEASE NOTE THAT A REQUEST OF MINYAN LOCATION DOES NOT GURANTEE PLACEMENT AT THAT LOCATION, AS THERE ARE SPACE LIMITATIONS DUE TO COVID-19

(FOR EXAMPLE: IF ONE ORIGINALLY SIGNED UP FOR THE 8:00AM MINYAN IN THE BET HAKNESSET AND MAXIMUM CAPACITY IS REACHED, SOME PEOPLE WILL BE RELOCATED TO OUR OTHER LOCATIONS)

Full Membership Fee: \$800.00

Full Members will be entitled to two (2) seats. One in the men's section and the other in the women's section.

Member's Unmarried Child: \$101.00

Member's Married Child: \$126.00

Associate Membership Fee: \$500.00

Associate Member will be entitled to one (1) seat.

Member's Unmarried Child: \$150.00

Member's Married Child: \$180.00

Non-Members: \$280.00 for every seat

RESERVATIONS

Name: _____

Tel #: _____

Address: _____

Email: _____

Please fill out the appropriate choices:

Full Membership: Man's Name: _____

Woman's Name: _____

Member's Unmarried Children: Number of seats: Male: _____

Female: _____

Member's Married Children: Number of seats: Male: _____

Female: _____

Associate Membership: Man's Name: _____

Woman's Name: _____

Member's Unmarried Children: Number of seats: Male: _____

Female: _____

Member's Married Children: Number of seats: Male: _____

Female: _____

Non-Membership: Man's Name: _____ Woman's Name: _____

Non-Member's Unmarried Children: Number of seats: Male: _____ Female: _____

Non-Member's Married Children: Number of seats: Male: _____ Female: _____

Total Number of Seats: Men's Section: _____ Women's Section: _____