



# HIGH HOLIDAY TICKET REQUEST

**PLEASE PRINT**

NAME: \_\_\_\_\_ Member: \_\_\_\_ Y \_\_\_\_ N

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**YOUR TICKETS WILL BE AVAILABLE FOR PICK UP AT WILL CALL**

NAME(S) OF GUEST(S): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MEMBER CHILDREN 13-26 YEARS OLD **LIVING AT HOME OR IN SCHOOL RECEIVE COMPLIMENTARY TICKETS**  
SINGLE MEMBERS - 1 COMPLIMENTARY TICKET FOR A GUEST

	DONATION FOR MEMBER GUEST(s)	DONATION FOR NON MEMBERS
1 GUEST TICKET FOR SINGLE MEMBER	COMPLIMENTARY	N/A
EREV ROSH HASHANAH SERVICE	___ @ \$50 each	___ @ \$75 each
ROSH HASAHANA SERVICE	___ @ \$50 each	___ @ \$75 each
EREV YOM KIPPUR SERVICE	___ @ \$50 each	___ @ \$75 each
YOM KIPPUR SERVICE	___ @ \$50 each	___ @ \$75 each
ALL SERVICES	___ @ \$125 each	___ @ \$200 each
<b>TOTAL DONATION</b>		

**RECIPROCAL TICKETS**

**PLEASE REQUEST EARLY**

NUMBER OF TICKETS: \_\_\_\_\_ WHICH SERVICES; \_\_\_\_\_

NAME OF SYNAGOGUE: \_\_\_\_\_

ADDRESS OF SYNAGOGUE: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_

Please enclose check made to CBI and mail to:  
Congregation B'nai Israel 3600 Riverside Blvd Sacramento CA 95818  
Email [holidays@bnais.com](mailto:holidays@bnais.com) with any questions  
Phone: 916.446.4861