Beth El Synagogue Simcha Planner

B-Mitzvah Name: Date: Coordinator:

Parent(s) Names: Contact number:

Board Member on Bima:

Greeters:

Tallit presentation:

Gabbi 1\* Gabbi 2\*

Ark Opening:

Parents Prayer: Passing Torah\*

Carry Scroll(s):

**Torah Honors:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Aliya | Name | Hebrew Name | Relationship | Reader\* |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |
| Maf. |  |  |  |  |

Hagba’ah: Gelilah:

*\*Optional items*

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Prayer for Israel:

Prayer for Peace:\*

Prayer for Country:

Ashrei:\*

Ark Opening 2:

Ein Keloheinu

Aleinu

Adon Olam

Kiddush\*

Motzi\*

*\*Optional items*

Additional Notes: