

# Young Israel of Scarsdale's JCC High Holiday Ticket Request Form

(Please PRINT all requested information clearly)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip code: \_\_\_\_\_

Tel: \_\_\_\_\_ Cell: \_\_\_\_\_

## MALE SEATS

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

## FEMALE SEATS

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

Name: \_\_\_\_\_ Age: \_\_\_\_\_     RH     YK

## Guests Seats (Children 23 and older are considered "GUESTS")

**\$150      \$100      \$225**

Name: \_\_\_\_\_ M/F     RH     YK     BOTH

Name: \_\_\_\_\_ M/F     RH     YK     BOTH

Name: \_\_\_\_\_ M/F     RH     YK     BOTH

Name: \_\_\_\_\_ M/F     RH     YK     BOTH

Name: \_\_\_\_\_ M/F     RH     YK     BOTH

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**PLEASE DO NOT WRITE ANYTHING IN THE AREA BELOW THIS LINE**