

**BETH ISRAEL CONGREGATION**  
**High Holiday Ticket Request - 2019**

**TICKET REQUESTS MUST BE RECEIVED BY NOON**  
**Friday, September 27 for Rosh Hashanah and**  
**Monday, October 7 for Yom Kippur**

*We are very happy that your family and friends will be joining us for the holidays.*

*Only required for family guests. Member family tickets for members and children age 13-24 will be mailed to you once your pledge for 2018-2019 and required payments have been received. Member children age 25 and above should be included on the second page of your pledge form.*

*Please indicate the names and number of tickets you are requesting on the appropriate lines. For security purposes, all individual names are required.*

*Reciprocity is available for your guests who are members in good standing at other congregations. Information needed for guests with reciprocity is available in your membership renewal packet or on the Beth Israel website, [www.bethisrael-aa.org](http://www.bethisrael-aa.org).*

*Send form by mail (2000 Washtenaw, Ann Arbor, 48104), fax (734-665-2733) or email ([misrael@bethisrael-aa.org](mailto:misrael@bethisrael-aa.org))*

		Rosh Hashanah				Yom Kippur				Combined RH & YK
<i>names of guests including names and ages of their children with reciprocity</i>										
1		#RH	comp	or	#YH	comp	or	#RH&YK	comp	
2		#RH	comp	or	#YH	comp	or	#RH&YK	comp	
3		#RH	comp	or	#YH	comp	or	#RH&YK	comp	
<i>names of relative guests without reciprocity (\$72 per person per holiday)</i>										
1		#RH	at \$72	or	#YK	at \$72	or	#RH&YK	at \$144	
2		#RH	at \$72	or	#YK	at \$72	or	#RH&YK	at \$144	
3		#RH	at \$72	or	#YK	at \$72	or	#RH&YK	at \$144	
<i>names of non-relative guests without reciprocity (\$180 per person single holiday tickets \$272 combined RH&amp;YK tickets)</i>										
1		#RH	at \$180	or	#YK	at \$180	or	#RH&YK	at \$272	
2		#RH	at \$180	or	#YK	at \$180	or	#RH&YK	at \$272	
3		#RH	at \$180	or	#YK	at \$180	or	#RH&YK	at \$272	

*Please include names and ages of children. Tickets required for all children age 13-24.*

**TOTAL TICKETS REQUESTED: \_\_\_\_\_ Rosh Hashanah \_\_\_\_\_ Yom Kippur**

**Beth Israel member names \_\_\_\_\_ TOTAL AMOUNT DUE \$ \_\_\_\_\_**

Please return this form with payment.

**N a m e s**