

HIGH HOLY DAYS 5770 MEMBERSHIP RENEWAL PACKET

Please read through the ENTIRE form, fill it out and return it no later than September 1, 2009 with your payment to:
Congregation N'vay Shalom at 137 N. Larchmont Blvd #409, Los Angeles, CA 90004

Membership Renewal: (TO RECEIVE TICKETS, PLEASE FILL OUT THIS FORM COMPLETELY)

Name _____
 Birthdate _____
 Occupation _____
 Employer _____
 Employer's Address _____

 Business Phone _____
 Home Address _____

 Home Phone _____
 E-mail _____
 Marital Status _____

Name _____
 Birthdate _____
 Occupation _____
 Employer _____
 Employer's Address _____

 Business Phone _____
 Home Address _____

 Home Phone _____
 E-mail _____
 Marital Status _____

Wedding Anniversary _____

CHILDREN

- | | | | |
|----|------------|-----|----------------|
| 1. | Name _____ | M/F | Birthday _____ |
| 2. | Name _____ | M/F | Birthday _____ |
| 3. | Name _____ | M/F | Birthday _____ |
| 4. | Name _____ | M/F | Birthday _____ |

KADDISH INFORMATION

<u>Name of Deceased</u>	<u>Relationship to member, and member's name</u>	<u>Yahrzeit (date)</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

Membership Dues 2009-10

Family	\$1300	
Individual	\$ 700	
Bar/Bat Mitzvah	\$ 600	Number of children _____
Adult Bar/Bat Mitzvah	\$ 350	

Total _____

(must be paid by May 1, 2010)

Total from this side _____

Total from other side _____

GRAND TOTAL _____

PAYMENT INCLUDED _____

BALANCE _____

**Full payment preferred. 1/2 payment must be received in order to receive your High Holy Day Tickets

Payment Options:

1. Payment in full preferred _____ check _____ credit card _____
2. 1/2 payment now, please include a check postdated to **December 1st** for the balance _____ check _____ credit card _____
3. 1/2 payment now, please include 2 checks postdated to **December 1st, March 1st** _____ check _____ credit card _____
4. 1/2 payment now, please include 3 checks postdated to **December 1st, March 1st, June 1st** _____ check _____ credit card _____

Account Number: _____ Expiration Date: _____ Signature: _____

Ticket Request for Members only

You will automatically receive tickets for all adults, including college students, living in your home.

List any additional tickets you may need for extended family at \$85.00 each

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

****NonMembers must use special ticket form that is available at www.NvayShalom.com**

Prayer Book Request

We are using High Holy Day Prayer Books, which differ from our Shabbat Prayer Books. If you are new to our congregation and/or do not have these books, the Purchase price for each book is \$40. The Books will be available for pick-up at the High Holy Day Services.

Number of Prayer Books requested at \$40 each _____

Prayer Book Total _____

Yizkor Book

****If you wish to order a memorial plaque for your 'loved one(s)' please let Cantor Eva know at 323-463-7728 by Sept. 15. The cost is \$250.00.**

We would like to _____ include your loved ones in our Yizkor book. The cost is \$18 per name, if you would like to purchase a page, the cost is \$250 per page. (Names do not cost extra on full pages.) Please print clearly. If you are purchasing a page and have any special text or artwork that you would like to included, or any other special requests for your page, please call the office and make arrangements.

I would like to purchase a page _____

1. Name _____

2. Name _____

3. Name _____

4. Name _____

5. Name _____

6. Name _____

7. Name _____

8. Name _____

Service Participation

I would like to read a part in the Yom Kippur Afternoon service in: English _____ Hebrew _____

I would like to: Read _____ Chant _____ from Torah.

Name _____ Phone _____

Ushers Needed: Please let us know if you are available to usher.

Name _____ Phone _____

Parking:

We have a limited number of parking spaces. They can be reserved, but it will be based on receipt of your High Holy Day payment. The first 40 families who sent in their membership forms will have priority on these spaces. The cost of a space is \$5.00 per service, you may include this with your membership dues. Please call the office to find out if there are any parking spaces available.

CONGREGATION N'VAY SHALOM



Congregation N'vay Shalom

**A Transdenominational
Synagogue
Dedicated to the Renewal of
Jewish Spiritual Life**