

EAST MIDWOOD JEWISH CENTER

2023/5784 HIGH HOLY DAY ORDER FORM

Please return to East Midwood Jewish Center with check or credit card payment information. You can mail, drop off or email to: EMJC-1625 Ocean Ave., Brooklyn, NY 11230. wrosenfeld@emjc.org

We will mail tickets to you unless you request otherwise. The deadline for mailing tickets is September 8th.

Name(s) _____

Address: _____

Phone # _____ Email: _____

Item	Cost Per Item		Quantity	Total Amount
Kol Nidre Appeal Contribution	Fill in amount: \$ _____			\$ _____
New Year's Greetings: Your name will be included on a card distributed to our congregation and in the Blast	\$18.00			\$ _____
Book of Remembrance: In Memory Of (fill in name, on a separate sheet) (10 or more names=\$180 flat rate)	\$18.00	x		\$ _____
Additional Contribution- (You can write in purpose below): _____	Fill in amount: \$ _____			\$ _____
Ticket-Additional tickets (Member of EMJC): (This is the number of extra tickets needed above your membership level allotment). Zoom link is included in your membership.	\$150.00	x		\$ _____
Ticket- Non-Member of EMJC (Zoom link for non-members will be included in Ticket purchase). <u>Zoom only will be same price.</u>	\$200.00	x		\$ _____
Headphone listening device	Free	x		Free
Children's Services (Suggested price of \$54/family)	Fill in amount: \$ _____			\$ _____
Will you pay the credit card processing fee-(Check box):	Yes _____		No _____	Call me with fee- _____
				TOTAL \$ _____

My check, payable to the *EAST MIDWOOD JEWISH CENTER*, is enclosed

Please charge my card: Visa MasterCard Discover AmEx CARD ON FILE WITH EMJC

Credit Card #: _____ - _____ - _____

Exp. Date: ____/____/____
(MM/YY)

Card Code: _____
Visa, MasterCard or Discover: 3 digits located on back of card or AmEx: 4 digits on front upper right