

The shul where everybody knows your name!

Your Name:

## **Congregation Etz Chaim Sharon**

## Rabbi Yonatan Gorin

74 Billings Street, Sharon, Massachusetts 02067 www.etzchaimsharon.org (781) 781-784-7204

President: Alexander A. Flig Treasurer: David J. Snyder Secretary: Leonard Gerber, Ph.D. Director: Elliot B. Picard Director: Joshua Maeir Director: Janis B. Monat



## 2018 High Holiday Seating Form

Please complete this form for the High Holiday seats you are requesting in both the men's and ladies' sections of the shul. All seating must be paid for in advance of the High Holidays. Seating assignments will be not be made until payment is received. You must be a member in good standing to pay the membership rate. A member is in good standing is one whose membership dues are paid in full for all prior years. After *5 September 2018* High Holiday seating assignments will be on a first come, first served basis. Write "High Holiday seating 2018" in the memo line of your payment check. *Please use this form to reply even if you will not be at Etz Chaim for the High Holidays*.

| Seat Prices   |           |  |  |
|---|-----------|--|--|
| Adult, FULL Member (including non-married children over bar/bat-mitzvah): | \$100.00  |  |  |
| Adult, ASSOCIATE Member (including guests and prospective members):       | \$250.00  |  |  |
| Child (below bar/bat-mitzvah):  | NO CHARGE |  |  |
| Family Maximum, FULL Member:  | \$300.00  |  |  |

| FULL MEMBERS (including non-married children over bar/bat mitzvah) | ASSOCIATE MEMBERS (including guests and prospective members) |  |  |  |
|--|--|--|--|--|
| # of Men: # of Ladies:   | # of Men: # of Ladies:                                       |  |  |  |
| Children < bar/bat-mitzvah:  |  |  |  |  |

## **Family Rate**

| Requested seats are for: | Rosh Hashanah | Yom Kippur | Sukkot |
|--------------------------|---------------|------------|--------|
|                          |               |            |        |

|                                 | Number | Rate       | Subtotal |
|---------------------------------|--------|------------|----------|
| Total Adults, FULL Member:      |        | X \$100.00 |          |
| Total Adults, ASSOCIATE Member: |        | X \$250.00 |          |
| TOTAL PAYMENT:                  |        |            |          |

THIS FORM, INCLUDING PAYMENT, IS DUE NO LATER THAN 5 SEPTEMBER 2018.