

Temple Adas Shalom 5779/2018 High Holiday Order Form

Additional Ordering Information

Please complete and return the attached form as soon as possible, but no later than *the red due dates below*. Below are the options you have for RSVP'ing:

- RSVP & buy tickets online by visiting our store at <http://tashjc.corecommerce.com/High-Holiday-5779.html>
- Email the form to admin@templeadasshalom.org and call in your credit card number
- Fax the form to 410-939-1159, Attn.: Courtney Washburn-Marcheski
- Mail with an enclosed check or credit card number to 8 N. Earlton Road, Ext., Havre de Grace, MD 21078.

Guest Admission (Due September 7th) - Admission RSVP's are required for all individuals 18 years of age and older. Members in good standing receive admission at no charge for their member family. Dependents over 18 years of age, visiting family and friends, and local residents may also request guest admission at no charge. In each case, a donation to the Temple is requested to help maintain both year-round and High Holiday programs.

Rosh Hashanah Dinner (Due August 27th) - Rabbi Gila Ruskin will conduct a Sephardic New Year's Seder far beyond apples and honey! It will be a special ceremony where we will recite blessings over a variety of foods that symbolize our wishes for the New Year. The meal will be catered complete with wine, challah and much more!

Cost is \$25 (13+); \$10 (age 7-12); FREE (6 & under)

Break the Fast (Due September 7th) - Sponsored and organized by the Sisterhood. Please RSVP to admin@templeadasshalom.org or call (410) 939-3170.

Cost is \$5.00 per person (4+)

Lulav and Etrog - Pick-up will be on Friday, September 28th at our Sukkot Family Dinner and service.

Cost is \$45 per set

Sukkot Pot-Luck Dinner (Due September 25th) - We ask that you bring a cooked dairy dish to share that feeds 7-10 people. This could include a main dish like fish or pasta, a side, or a salad. This year we are using Signup Genius to arrange the food needed to make this an easy event.

SIGN UP GENIUS LINK - <https://www.signupgenius.com/go/4090c4aafa92ba2fd0-5779>

Cost is \$5.00 per person (4+)

Child Care

There is no charge for child care; however, it is very important that we know how many children will need this service so that adequate supervision is in place. We cannot guarantee placement of any child who is not pre-registered. This service is available for children ages 1-6 years only. Infants under age one must be accompanied by a parent at all times. Children will be cared for in the preschool rooms and light snacks will be provided. Your child will not be permitted to leave the room without a parent/guardian. Please leave a cell number with sitters to be contacted in case of emergency (*please silence phones while in the sanctuary*).

Want to build your own Sukkah?

Go to Sukkah Depot, 6006 Park Heights 410-358-2502 or 443-572-9735

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Please return this form as soon as possible for all of your High Holiday reservations

Our family will be attending:

Erev RH: _____ RH Day 1: _____ RH Day 2: _____ Kol Nidre: _____ Yom Kippur: _____

Date	Event/Item	Adults (13+)	Price/Adult	Children (4-12)	Price/Child	Total Req.	Total Donation/ Cost
Sept. 9-11	<i>Rosh Hashanah Guest Admission</i>		<i>Donation Requested</i>		<i>Donation Requested</i>		\$
Sept. 18-19	<i>Yom Kippur Guest Admission</i>		<i>Donation Requested</i>		<i>Donation Requested</i>		\$
Mon., Sept. 10 6:30 PM	<i>Rosh Hashanah Seder</i>		\$25		\$10		\$
Wed., Sept. 19 6:30 PM	<i>Break the Fast</i>		\$5		\$5		\$
Fri., Sept. 28 6:15 PM	<i>Sukkot Potluck</i>		\$5		\$5		\$
Sukkoth Family Festival	<i>Lulav/Etrog Sets</i>		\$45/set		\$45/set		\$
Sub Total:							\$
Additional Amount for Temple Dues (if applicable):							\$
Additional High Holiday Donation (specify fund if applicable: _____):							\$
Grand Total:							\$

Family Name: _____

___ Please charge the grand total above to my credit card on file.

___ Please charge to this credit card: _____ Exp Date _____

___ Enclosed is my check in the amount of: \$ _____

CHILD CARE

Parent/Guardian Name _____ Home: _____ Cell: _____

Date	Service	Child/Children's Names	Special Instructions	Allergies?
9/9	<i>Erev Rosh Hashanah</i>			
9/10	<i>Rosh Hashanah - Day 1</i>			
9/11	<i>Rosh Hashanah - Day 2</i>			
9/18	<i>Kol Nidre</i>			
9/19	<i>Yom Kippur</i>			

Please return to the Temple Office via mail, via fax (410-939-1159)
or email at admin@templeadasshalom.org no later than *the red due dates listed on the first page.*