



Rabbi Ari Perl  
Senior Rabbi

Robert Liener  
President

Danielle Mann  
Administrative Director

Rabbi Michael Friedman  
Assistant Rabbi

Rabbi Aaron Kaplan  
Youth/Teen Rabbi

Janet Stein  
Secretary

[www.shaaretefilla.org](http://www.shaaretefilla.org)

[shaaretefilla@gmail.com](mailto:shaaretefilla@gmail.com)

972-661-0127

## **5772 / 2011 High Holiday Seating Form**

**Please review the following information carefully before proceeding:**

- High Holiday seats are purchased for **both** Rosh Hashanah (September 28<sup>th</sup>-30<sup>th</sup>) and Yom Kippur (October 7<sup>th</sup>-8<sup>th</sup>). If you are certain that you will not be using your seats during the holidays, kindly indicate that on the form attached. *For security purposes, please inform the office if someone other than those listed below will be using any of your seats during the Holidays.*
- **Parents are required to purchase seats for all children in grades 6 and up.** We will have full **childcare and youth programming** for infants thru grade 5. *(Please refer to the attached High Holiday childcare registration form for more detailed information.)*
- In addition to the Main Service, there will also be a parallel **Auxiliary Service** in the Large Social Hall. *(Due to the increased demand for seating, we cannot guarantee seating at tables in the Auxiliary Minyan.)*
- Please note that seats cannot be reserved until all **outstanding financial obligations** have been met. Member rates are available only to those who have submitted their **dues commitment form** for the 2011-2012 year.
- **Last year's seats may be retained** by checking the appropriate box on the attached form and submitting it with payment by **Friday, August 26, 2011** and indicating your preferences below. No further action is necessary. Beginning on Sunday, 8/28, all remaining seats will be released on a 1<sup>st</sup>-come-1<sup>st</sup>-served basis. Seats will be available to non-members, though seating preferences will be given to members over non-members.
- On Sunday 8/28 from **10:30AM - 12:00 PM**, and on Sunday 9/4 from **9:00 AM - 10:30 AM**, Rabbi Kaplan will be taking requests for specific seats that are not being retained from last year. Seats will be assigned only to those whose financial arrangements are in order. A representative of the finance committee will be on-site and available to settle any outstanding obligations.
- If you need to make special financial arrangements for membership dues or High Holiday seats, please contact Robert Liener at (972) 980-0011 or Aaron Handler at (214) 871-5655.
- ***This form and payment in full must be remitted to the synagogue office by Friday, August 26<sup>th</sup>.***

**If paying by credit card, forms may be emailed to [shaaretefilla@gmail.com](mailto:shaaretefilla@gmail.com) or faxed to [972-661-0150](tel:972-661-0150).**

- If you have questions or concerns, please contact the shul office by phone at (972) 661-0127 or via e-mail at [shaaretefilla@gmail.com](mailto:shaaretefilla@gmail.com).

*Thank you in advance for your cooperation.*



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**Name:** \_\_\_\_\_

	<u># of Seats</u>	x	<u>Cost per Seat</u>	=	<u>Subtotal</u>
<b>Member</b>	_____	x	\$175	=	\$ _____
<b>Associate Member</b>	_____	x	\$225	=	\$ _____
<b>Non-Member</b>	_____	x	\$300	=	\$ _____

\*Student rates are available for college and graduate school students paying for their own seat.

**TOTAL:** \$

Men's Seats (list each seat holder)	Women's Seats (list each seat holder)	Preferred Minyan (Main or Auxiliary)

**Seating Preference** (please choose one):

retain last year's seats

meet with Rabbi Kaplan to select seats on 8/28 or 9/4

other \_\_\_\_\_

\*We will make every effort to accommodate your seating requests to the best of our abilities.\*

***This form must be accompanied by payment in full.***

**Method of Payment:**  Check  Credit Card

**Card Type:**  MC  Visa  AmEx

**Cardholder** (please print) \_\_\_\_\_

***A surcharge of 3% will be added to all credit card charge transactions to cover the processing fees charged by the bank.***  
***Thank you for your understanding.***

**Billing Address** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Card #** \_\_\_\_\_

**Exp. Date** \_\_\_\_\_ **3 or 4 digit Security Code** (on back of card) \_\_\_\_\_

**Cardholder Signature** \_\_\_\_\_