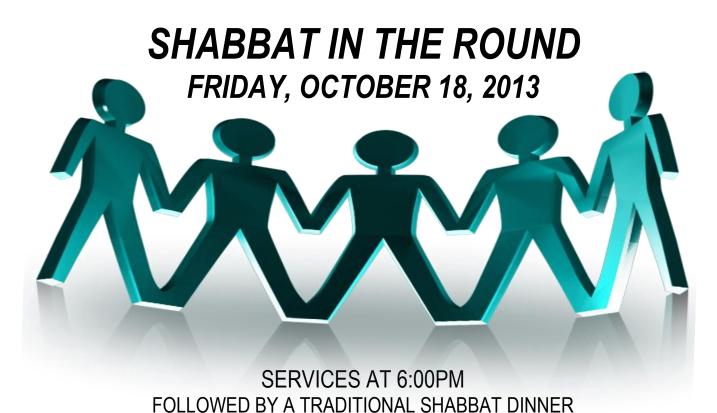
EAST MIDWOOD JEWISH CENTER

1625 OCEAN AVENUE - BROOKLYN, NY 11230 - 718.338.3800



2

PLEASE COMPLETE THE BOTTOM PORTION OF THIS FORM AND RETURN IT WITH YOUR PAYMENT

RSVP NO LATER THAN TUESDAY, OCTOBER 15, 2013

SHABBAT IN THE ROUND	PLEASE LIST ALL ATTENDEES INCLUDING CHILDREN EVEN IF THERE IS NO CHARGE.	
FRIDAY, OCTOBER 18, 2013	NAME OF ATTENDEE	COST
ADULTS (13 years old and up) \$25 for non members / \$20 for EMJC members	1.	
	2.	
CHILDREN (5 to 12 years old) \$12.50 for non members / \$10 for EMJC members (Children 4 and under are FREE)	3.	
	4.	
	5.	
Address:	6.	
	7.	
Phone:	8.	
	9.	
	10.	
	TOTAL AMOUNT DUE	\$

I/We would like to be seated with:	

PAYMENT/AUTHORIZATION INFORMATION				
Amount:\$_	[] VISA [] Mastercard [] Discove	r		
	Card Number:			
	Expiration Date:			
First Name: _		Name as it appears on		
Last Name: _		credit card		
Address:		Billing address for credit card		
City:	State Zip	ordan dara		
Phone:	Email:			