

extended family members.

Welcome to Congregation Beth Shalom. We are delighted that you have chosen to share High Holidays with us. We ask that you consider making a donation for the ticket(s) that you are requesting for out-of-town guests, adult children or

Please mail form to: Congregation Beth Shalom, Attn: Sue Prousa, 772 W. 5th Avenue, Naperville, IL 60563

For each guest ticket, please provide names, addresses, phone numbers, email addresses and relationship to you on the bottom of this form.

Member Name	Yes, I would like to make a donation to CBS in appreciation of its welcoming policy.				
Total Number of Guest Tickets Requested	\$540 \$360 \$180 \$72\$36 Other (Fill in Amount) \$				
Paymen Total Amount Enclosed by check	nt Information				

Please add 3% and charge Visa/MasterCard/Discover							
Card No				Exp. Date	Security Code		-
			Guest(s) Iden	tification			
Name:				Name:			
Street:				Street:			
City:	_State:	Zip:		City:	State:	Zip:	
Email:		_Ph:		Email:		_Ph:	_
Relationship to Member:				Relationship to Me	ember:		
Name:				Name:			
Street:				Street:			
City:	_State:	Zip:		City:	State:	Zip:	
Email:		_Ph:		Email:		_Ph:	_
Relationship to Member:				Relationship to Me	ember:		_

Additional names can be listed on the back.