



Member Reciprocal Seating Request Form

Members in “good standing” at Temple Sholom who would like to spend the holidays at another congregation must fill out the form below and return by **Sept. 10, 2019** to Eileen Robin, Executive Director, Temple Sholom, 300 East Putnam Avenue, Greenwich, CT 06830. For questions, call 203-869-7191 or email eileen.robin@templesholom.com.

Today’s Date: _____

Congregant’s Information:

Name (first & last): _____

Spouse’s Name (first & last): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Child’s Name: _____ Age: _____ Grade: _____

Child’s Name: _____ Age: _____ Grade: _____

Child’s Name: _____ Age: _____ Grade: _____

Child’s Name: _____ Age: _____ Grade: _____

Where should tickets be sent? Mailed to Congregant at Address Above Held On-site for Pick-up

From the Executive Director:

The above named individual(s) is/are member(s) of our Congregation in good standing. His/Her/Their annual membership dues are _____ which include _____ tickets for High Holiday services at our synagogue as part of their membership dues. They will be in your area for the High Holy Days this year. We would be grateful if you would extend to them the courtesy of High Holy Day seating at your synagogue.

Thank you for your consideration,

Signature: _____ Date: _____

Eileen Robin, Executive Director
203-869-7191 Ext. 139
eileen.robin@templesholom.com