

JOIN US HIGH HOLY DAYS RESERVATION

Dear Friends,

We value your participation in our services and warmly invite you to join us for the High Holy Days. Please reserve your seat(s) by completing the form below, selecting any additional contributions you wish to make, and returning it in the enclosed envelope.

YOUR INFORMATION

Name(s):

Address:

City: State: Zip

Phone: Email:

NON-MEMBER SEAT RESERVATIONS

I would like to purchase seats for the following services:

- ☐ **Rosh Hashanah 1 & 2:** _____ seat/s (\$250 per person)
- ☐ **Kol Nidre & Yom Kippor:** _____ seat/s (\$275 per person)

KOL NIDRE CONTRIBUTION

As we gather for the sacred Kol Nidre service, we invite you to support Or Olam. Your gift helps sustain our synagogue and ensures we remain a vibrant home for Jewish life.

- ☐ \$180 ☐ \$360 ☐ \$540 ☐ \$1,000 ☐ \$2,500
- ☐ \$3,600 ☐ \$5,000 ☐ \$10,000 ☐ \$18,000 ☐ _____ (other)

HIGH HOLY DAYS ATTENDANCE

Please note the services you will attend and the number of attendees.

- ☐ RH1 _____ ☐ RH2 _____ ☐ Kol Nidre _____ ☐ YK _____

More details on the back

TOTAL

\$

אור עולם

For the Lord shall be your light everlasting



GOOD DEEDS

Join Or Olam to worship in a meaningful spiritual setting, deepen your understanding of Jewish values, celebrate our shared traditions, and build connections within a warm and welcoming community.

PAYMENT INSTRUCTIONS

You may send your payment using any of the following methods:



Check – Make checks payable to *Or Olam, The East 55th Street Synagogue* and mail in the enclosed return envelope to our office.



Credit Card – Complete the credit card form below and return it in the enclosed envelope.



Website – Visit www.east55.org, click “Make a Donation”, and follow the instructions to make payment for any contribution type.



Zelle – Send to zelle ID - **office@east55.org**. Please email us your payment confirmation so we can update your file.



PayPal – Send to Paypal ID - **office@east55.org**. Please email us your payment confirmation so we can update your file.



ACH / Bank Transfer – Send electronic payment to:

Name: Or Olam, The East 55th Street Synagogue. **Bank:** Chase Bank
Account #: 203026606 **Routing #:** 021000021

Name on card : _____ Card Type : _____

Card Number : _____

Exp Date : _____ Billing Zip : _____ CVV Code : _____

תודה רבה