



# High Holy Day Ticket Order Form

**For Non-Members: 2 tickets maximum per family**

\_\_\_ I/ We would like to purchase High Holy Day Service Tickets:  
*(These tickets must be picked up at Temple Sholom **after August 10th**. Tickets cannot be mailed. Ticket recipients must present a valid state ID at the time of pickup. Tickets will not be released without an ID. You can also pick tickets up at the Stratford Street Help Desk during the High Holy Days, but please allow time for long lines.)*

Ticket #1 Recipient Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Ticket #2 Recipient Name \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

RESIGNED MEMBERS CANNOT PURCHASE HHD TICKETS WITHIN TWO YEARS OF THEIR RESIGNATION. TO REJOIN TEMPLE SHOLOM, PLEASE CONTACT JOSIE A.G. SHAPIRO AT 773-435-1541, OR BY EMAIL AT JOSIE@SHOLOMCHICAGO.ORG

**BILLING INFORMATION:**

# of Non-Member Tickets being purchased (*maximum of two*): \_\_\_\_\_  
Total \$ \_\_\_\_\_ (\$250 each or two for \$400)

Please circle one:      VISA              MASTERCARD

**Credit Card #** \_\_\_\_\_ **Expiration** \_\_\_\_\_

**Billing Name** \_\_\_\_\_

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

**SIGN HERE** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Questions? Please contact Jennifer Adams in the Membership Office at 773-435-1557.**

Please return this form and your payment to:  
**Fax: 773-525-3502**  
OR  
**Temple Sholom of Chicago**  
**5398 Paysphere Circle \* Chicago, Illinois 60674**  
*please note that payment must be postmarked no later than August 10*

*If purchasing tickets after August 10, ticket requests may be faxed to 773-525-3502 or hand delivered to Temple Sholom, 3480 N. Lake Shore Drive*