



Congregation Beth Israel Ner Tamid – High Holy Day Information

High Holy Days 2024/5785

Selihot	Saturday, September 28
Erev Rosh Hashanah	Wednesday, October 2
Rosh Hashanah	Thursday October 3 and Friday, October 4
Kol Nidre	Friday, October 11
Yom Kippur	Saturday, October 12

Congregation Beth Israel Ner Tamid welcomes guests for the High Holy Days. Guest tickets are required for admittance to services, and may be requested by CBINT members or directly by individuals according to the following guidelines:

1. United Synagogue of Conservative Judaism (USCJ) Synagogue Members

Out of town guests who are members of another USCJ-affiliate synagogue are eligible for reciprocal tickets **at no charge**. We do ask for verification of membership from the home synagogue before issuing USCJ-affiliate guest tickets.

2. Immediate Family of CBINT Members

CBINT members may request High Holy Day tickets for immediate family (mother, father, sister, brother, child, grandchild, grandparent) for a **recommended donation of \$54 per guest ticket**.

3. Students

All students may request High Holy Day tickets **at no charge**. ID may be requested to confirm student status.

4. All Other Guests

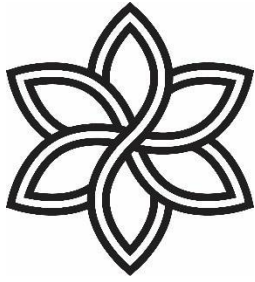
All other guests may request High Holy Day tickets for a **recommended donation of \$118 per guest ticket**.

Per CBINT policy, those requesting guest tickets should provide the following information for themselves or their guests:

Name
Address
Email
Phone number
Active or immediate prior synagogue affiliation*

***If the affiliation is with a local SE Wisconsin synagogue**, we are providing guest tickets on the good faith assumption that those requesting the tickets are, or were, at the end of their affiliation, “members in good standing” at their primary synagogue.

(see reverse side)



High Holiday Ticket Form – Guests of CBINT Members

Please return to the CBINT office:

6880 N. Green Bay Avenue, Glendale, WI 53209

Or email: marlynnb@cbintmilwaukee.org

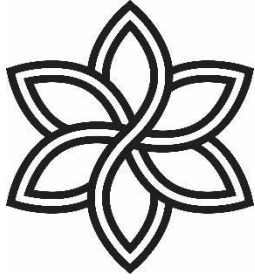
CBINT Member’s Name _____

In addition to the ticket(s) that come with my/our membership, I would like tickets for the following people:

Name _____
Guest _____ **Student** _____
Address _____
City _____ **State** _____ **Zip** _____
Email _____ **Phone:** _____
Relationship to Member _____
Home synagogue name/city (if applicable) _____
Donation \$ _____

Name _____
Guest _____ **Student** _____
Address _____
City _____ **State** _____ **Zip** _____
Email _____ **Phone:** _____
Relationship to Member _____
Home synagogue name/city (if applicable) _____
Donation \$ _____

Name _____
Guest _____ **Student** _____
Address _____
City _____ **State** _____ **Zip** _____
Email _____ **Phone:** _____
Relationship to Member _____
Home synagogue name/city (if applicable) _____
Donation \$ _____



**High Holiday Guest Ticket Form
(non-member request)**

Guest Name(s) _____

Address _____

City _____ **State** _____ **Zip** _____

Email _____ **Phone:** _____

Student _____ (yes/no)

USCJ synagogue member _____ (yes/no)

Home synagogue name/city _____

Referred by CBINT Member(s) _____ (yes/no)

CBINT member name(s) _____

Donation \$ _____