

Temple Sinai



Learning • Serving • Caring

PLEASE COMPLETE AND RETURN BY JANUARY 6, 2018

Child's Name: _____

Bar/t Mitzvah Date: _____

Parent(s) Name(s): _____

Email: _____ Phone: _____

Email: _____ Phone: _____

We will be hosting a Friday Night, Shabbat Dinner at the synagogue the night before our Bar/t Mitzvah.

We will be having an extended Kiddush/Luncheon at Temple Sinai on Saturday after our service.

We will be having our Saturday night celebration at Temple Sinai.
***Please note, if you are having a mincha/ma'ariv/havdallah service, you are required to have your celebration at Temple Sinai immediately following the service*

***Saturday night celebrations can not begin until after Shabbat is over (which falls late in the Spring and Summer months)*

Signature _____

Date _____