

Gala Response Card

Name(s): _____ Company: _____

Address: _____ City: _____

State: _____ Zip: _____ Telephone: _____

Cover \$125.⁰⁰ per person # attending: _____ Enclosed \$ _____ Check #: _____

Please seat me/us with: _____

Please call the TBT office 516-221-2370 for Credit Card payments.

There will be a 3% fee added to all Credit Card payments

Make check(s) payable to Temple B'nai Torah

Cash or Check payments are preferred

Please turn card over and read important information.