

O`AHU JEWISH `OHANA
2024 SHABAT-SEDER
Friday, April 26th, 2024
RSVP FORM

Cost: Members: \$75.00 Non-Members: \$100. Children 5-12: \$35.00 Under 5: No Cost
Please send this completed form with check payable to **O`ahu Jewish `Ohana**, . Note Seder on your check.

Send to: Sue Brown 688 Ululani St., Kailua, HI 96734

RETURN BY: FRIDAY, APRIL 5th

The following will attend: (please **PRINT** names of all who be attending):

Adults:

_____	(OJO Member: Yes No)	\$ _____
_____	(OJO Member: Yes No)	\$ _____
_____	(OJO Member: Yes No)	\$ _____
_____	(OJO Member: Yes No)	\$ _____
_____	(OJO Member: Yes No)	\$ _____

Children (5-12): ____

_____	\$ _____
_____	\$ _____
_____	\$ _____

Children under age 5 (include age):

I would like to assist others to attend by contributing		
\$ _____ to the Seder Fund:		\$ _____

TOTAL \$ _____

Dinner Options:

** C Chicken Entrée ** S Salmon Entrée ** V Vegetarian Entree

****Please circle your choice of Dinner Option for each Guest (chicken, salmon, vegetarian):**

Name: _____	Dinner Option:	C	S	V
Name: _____	Dinner Option:	C	S	V
Name: _____	Dinner Option:	C	S	V
Name: _____	Dinner Option:	C	S	V
Name: _____	Dinner Option:	C	S	V

Please list any additional individuals attending and dinner choices on the back of this form.

If requesting financial assistance, or you have any questions, please contact:

Sue Brown: suebrown96734@gmail.com or 808-741-3123

our Contact Information

Name: _____ E-Mail: _____ Phone: _____