

# HIWP NON MEMBER SEATING REQUEST FORM 2018

Please fill out complete information for each seating request. Seating requests can not be processed without full details. We will email your confirmation with your seating assignments or mail if no email is provided. Please use the check box if you wish to be on our email list to be notified of HIWP special events and activities (optional). We respect your privacy and will not sell or share your personal info or email address.

ADULT MALE #1  
Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_ [ ]

ADULT MALE #2  
Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_ [ ]

MALE (COLLEGE STUDENT)  
Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_ [ ]

MALE (CHILD under 18)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

ADULT FEMALE # 1  
Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_ [ ]

ADULT FEMALE # 2  
Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_ [ ]

FEMALE (COLLEGE STUDENT)  
Name \_\_\_\_\_

Address \_\_\_\_\_

Phone/Email \_\_\_\_\_ [ ]

FEMALE (CHILD under 18)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

NOTE: IF YOU ONLY NEED SEAT FOR ROSH HASHANA OR YOM KIPPUR,  
PLEASE PUT [R] or [Y] BEFORE THE NAME.

COST: ADULT CHILDREN (over 18) / GUESTS \$210

COLLEGE STUDENT \$155

CHILD (under 18) \$80

Total Number \_\_\_\_\_ MALE ADULT

Total Number \_\_\_\_\_ MALE STUDENT

Total Number \_\_\_\_\_ MALE CHILD

Total Number \_\_\_\_\_ FEMALE ADULT

Total Number \_\_\_\_\_ FEMALE STUDENT

Total Number \_\_\_\_\_ FEMALE CHILD

Payment: Credit Card:  Visa  Mastercard  American Express

# \_\_\_\_\_ Exp \_\_\_ / \_\_\_

Check

Cash