

3700 Henry Hudson Parkway - Bronx, NY 10463 - www.hir.org

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AVRAHAM WEISS Senior Rabbi

STEVEN EXLER
Associate Rabbi

Sara Hurwitz Rabba

Elli Kranzler Shaliach Tzibbur

BERNARD HOROWITZ

Ba'al Kriah

MENACHEM MENCHEL
Youth Director

AARON BRAUN

JYEP Director

LINDA BASCH
Director, Social Services

DAVID SCHWARTZ

President

RONNIE BECHER
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ARTHUR BLOOM
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Vice Presidents

ILENE PAIKIN
Recording Secretary

HILLEL JAFFE
Secretary/Treasurer

GILLIAN STEINBERG Financial Secretary

August 1, 2011 Av 1, 5771

Dear Friends,

Let me be one of the first to wish you a very happy and healthy New Year. While it is still the middle of summer, it is time to make reservations for your High Holiday seating at HIR. We will again offer four tefillot: the Main Sanctuary Tefillah, Social Hall Tefillah, Learning Service Tefillah (now with reserved seating) and the Sephardic Tefillah. Please complete and return the enclosed form with your payment as early as possible to ensure your seating reservation. Reservations will only be processed if accompanied by check made out to Hebrew Institute of Riverdale or credit card payment. We will hold last year's seating assignments for anyone who pays for reservations by Monday, August 15th. After that time, we reserve the right to release seats for sale to others. If you occupied seats last year and do not plan to use them this year, kindly let us know as soon as possible so that we can reassign those seats to others. This is particularly important for the Main Sanctuary as we expect to fill every seat.

In an effort to enable everyone to enjoy a more meaningful High Holiday experience, we ask all parents to make arrangements for the supervision of their children during services. As in prior years, we are offering babysitting by professional teachers, with a low child-to-teacher ratio. We will also provide snacks and lunch for no additional charge. Please refer to the enclosed form for ages and pricing. All children that are not with babysitting should be with their parents, so <u>please purchase sufficient seating for your family</u>.

If you have an open balance your statement is enclosed. In order to process your seat reservation request, please pay your balance at this time. The office staff cannot issue tickets to anyone with an account past due balance unless a payment plan is worked out in advance.

Tickets will be mailed approximately one week before Rosh Hashanah.

Please submit your form to reserve your seats through the mail, by fax, by email or by coming into the office.

Enjoy the rest of your summer!

Best wishes,

David Schwartz



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August 1, 2011 Av 1, 5771

Dear Friends,

I write to encourage your generous support of our annual Kol Nidre Appeal. We eliminated our verbal appeal at Kol Nidre several years ago to help maintain the proper sense of *kavana* during our *tefillot*. In order to continue this practice, we ask you to make your pledge prior to the holidays.

Our current membership rates are materially lower than comparable Riverdale synagogues. In addition, many synagogues have mandatory capital funds or "fair share" membership structures. We have neither. We believe basic membership dues should remain low so that everyone feels welcome in our *Bayit*.

To finance this philosophy, we must ask for your additional support at various times throughout the year. The Kol Nidre Appeal is one of these times, and the appeal is one of our most important fundraisers. It typically raises in excess of \$100,000 for our *Bayit*. We unfortunately fell short of this mark last year, so please give more this year if you can. With your help, we can make this our most successful appeal ever.

Please complete the appeal pledge form below and return it in the enclosed envelope with your payment. If you are paying by credit card, please also include the enclosed authorization form.

May you and your family be inscribed in the Book of Life for the coming year.

All the best,	
David Schwartz	

Kol Nidre Appeal 5772 – Pledge Form

Name:							
Address:						Phone	:
Circle amount:	\$25,000	\$15,000	\$10,000	\$5,000	\$3,600	\$2,500	\$1,800
	\$1,000	\$750	\$500	\$250	\$180	\$118	\$100
Other amount _							
Check enclosed		Please see	e enclosed c	redit card a	authorizatio	on	Please bill me
Would you like	your pledge	to be ackno	wledged in	the Kol Nic	dre booklet	:? YES	NO
IN HONOR OF	:					_	
IN MEMORY ()F:						

HEBREW INSTITUTE OF RIVERDALE - THE BAYIT 2011/5772 HIGH HOLIDAY SEATS

year of Happiness and Health

3700 Henry Hudson Parkway, Bronx, NY 10463 Phone: 718-796-4730 Fax: 718-884-3206 www.hir.org hir_nexus@yahoo.com

Payment must accompany all seat orders.

NAME:					_
ADDRESS:	DRESS: CITY		_ STATE	_ZIP	_
	WORK				
	MOMA				
NUMBER OF CHILDREN (H.S	S. OR YOUNGER) YOU PLAN TO BR	NG TO SHUL			_
DESIRED LOCATION (PLEA Main Sanctuary	SE CHECK ONE)				
Social Hall					
Learning Service					_
Please indicate how many men's and women's seats you need:			OFFICE USE ONLY		
MEN'S SEATS	# OF SEATS		2010 SEATS	2011 SEATS	
Number of adults					
Number of children (H.S. o	r younger only)				
WOMEN'S SEATS	# OF SEATS		2010 SEATS	2011 SEATS	
Number of adults					
Number of children (H.S. o	r younger only)				
PLEASE CHECK: ME	MBER NON-MEMBER				
If you are not a member or have not yet paid dues for 2011 and would like to enjoy the member rate, please include your membership dues with this form.					
Family Membership First Year Rate: \$1000 (Regular Rate: \$1250) Single-Parent Family First Year Rate: \$700 (Regular Rate: \$875) Single Membership First Year Rate: \$500 (Regular Rate: \$625)					
LOCATION	MEMBER RATE	NON-MEMBER RATE			
Main Sanctuary Adults	\$350	\$550	\$550		
Main Sanctuary Children	\$250 for each of the first 2 childres \$75 for each additional child	n \$275	\$275		
Social Hall and Learning Service Adults	\$225	\$350			
Social Hall and Learning Service Children	\$100 for each of the first 2 childreness for each additional child	\$125 for each of the first 2 children \$75 for each additional child		nildren	

Office Use Only: Check #: _____ Date: _____ Amount: \$ _____



CREDIT CARD AUTHORIZATION FORM FOR HEBREW INSTITUTE OF RIVERDALE – THE BAYIT 3700 Henry Hudson Parkway Bronx, NY 10463 718-796-4730

High Holiday Seats & Kol Nidre 5772

If you would like to charge your seat order, Kol Nidre pledge or make any other donation with your MASTERCARD or VISA, please complete the authorization form below.

Although the synagogue pays a fee to accept credit cards, there is no additional charge for this service. There is, however, a minimum charge of \$20.00.

I authorize Hebrew Institute of Riverdale – The Bayit to charge the following

amount(s) to my credit card: Please immediately charge my credit card in the amount of _______. AND/OR Please charge my credit card in the amount of ______ per month for _____ months Name on MASTERCARD or VISA (only) _____ MASTERCARD or VISA Number ______ Expiration Date ______ Signature ______ Date ______

If you have any questions or comments, please contact Phyllis Newsome at 718-796-4730 x103.

HIR Youth Department

High Holidays Childcare Registration

Dear Friends,

The Youth Department is arranging special Rosh Hashanah and Yom Kippur childcare for children in Nursery (three-year-olds) through Second Grade. This wonderful childcare option offers a low child-to-teacher ratio; multiple professional teachers in each classroom; healthy snacks; and a nutritious, child-friendly lunch each day. The schedule for these groups is as follows:

Rosh Hashanah Day 1 Thursday, September 29, 2011 9:30am – 1:15pm

Rosh Hashanah Day 2 Friday, September 30, 2011 9:30am – 1:15pm

Yom Kippur Shabbat, October 8, 2011 10:00am – 2:30pm

Note: ADVANCE REGISTRATION IS REQUIRED.

To register, please fill out the form on the reverse side and return it with your High Holidays Seat form to the HIR office (or mail it in), no later than Thursday, September 15. Space is limited, and families who submit forms after this date will not be guaranteed a spot. Cost is \$50 per child, per session, or \$135 per child for all 3 sessions. This registration fee helps defray the cost of hiring professional teachers as well as the cost of food. Payment must accompany the form below. Please make all checks payable to the Hebrew Institute of Riverdale. Only children within the age groups listed above will be permitted to register. Children who are not registered for High Holiday Childcare will not be permitted to attend.

If you do not have private childcare arrangements outside of shul, your children MUST either be registered for HIR Childcare or have their own seats with you in shul. To maximize the safety of our children and to maintain a meaningful prayer experience throughout the building, children may not loiter in the hallways.

*A playroom will also be available during all daytime High Holiday services. Children in the playroom require parental supervision.

If you have any questions, please contact Menachem Menchel at: $(718) 796 - 4730 \times 119$ or send an e-mail to hirmenachem@gmail.com.

HIR CHILDCARE REGISTRATION FORM

Parent's Name:		_
Number of Children:		
Name(s)*	Age(s)	Sessions Will Attend
		RH1RH2YK
		RH1RH2YK
		RH1RH2YK
Enclosed Amount:		
* Please indicate below i	if your child has any allerg	ies or special needs:
Parent's Signature:		
	********	***********
Office Use Only:	Parent's Seat #	

