

THE HIGH HOLY DAYS 5778/2017 FOR CHILDREN AT CAI



Babysitting

(Ref. pg. 8)

For children 18-months- through 5-years old
on First and Second Days of Rosh Hashanah, 9:30am to 12noon;
and on Yom Kippur, 9:30am to 1:00pm.

\$10 per child, per day • RSVP Deadline: Sept. 14
NO CHILD CAN BE ADMITTED WITHOUT A RESERVATION.

Name(s) _____ Phone _____

Child's Name & Age	1 st Day Rosh Hashanah Thur., Sept. 21	2 nd Day Rosh Hashanah Fri., Sept. 22	Yom Kippur Sat., Sept. 30
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(To list more children, please attach separate sheet.)

___ Check enclosed.

___ Charge my: Visa MC Discover for \$ _____

_____ Exp. _____ Sec. Code _____

**Please return completed
form with payment
by Sept. 14
to CAI, ATTN: Kim**

Services for Children and Families

(Ref. pg. 7 **OR** Ticket Order Form)

First Day Rosh Hashanah, Thur., September 21
Second Day Rosh Hashanah, Fri., September 22
and Yom Kippur, Sat., September 30

RSVP Deadline: Sept. 14



Name(s) _____

Phone _____

RH= Rosh Hashanah *Please list name(s) of child(ren) attending each service.*

YK= Yom Kippur *(To list more children, please attach separate sheet.)*

An adult must accompany child(ren).

Family Service **RH1** _____

(1st Gr. thru 6th Gr.) **YK** _____

10:30am – 12noon

Cantor Falkow Lounge

Young Children's Family Service **RH1** _____

(Preschool/Kindergarten) **YK** _____

10:45am – 12noon

Room 11

All Family Program **RH2** _____

(Preschool thru 6th Gr.)

10:45am – 12noon

Cantor Falkow Lounge

**Please return completed form by
Sept. 14 to CAI, ATTN: Kim**

Yom Kippur Lunch for Children Ages 3 to 12

(Ref. pg. 10)

Saturday, September 30 • 12:15pm



There is NO CHARGE;
however, reservations
are required.

RSVP Deadline: Sept. 20

Child's Name _____ Age _____

*(To list more children,
please attach separate sheet.)*

**Please return completed form
by Sept. 20 to CAI, ATTN: Kim**



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