

TEMPLE BETH SHALOM
760 ROUTE 6, MAHOPAC NY 10541
FRIDAY ONEG FORM

Name of Event _____ Date of Event _____

Please check Room(s) Requested: _____ Shulman Kiddush Room and/or _____ Peterson Auditorium

Time of Event _____ AM/PM Time Event Expected to End _____ AM/PM

Bakery _____

of guests attending religious services and Oneg: _____

PLEASE BE AWARE OF THE FOLLOWING INFORMATION REGARDING YOUR EVENT:

1. All food & beverages brought into the temple must be certified kosher and all supplies for your Oneg must be brought in before Shabbat begins on Friday.
2. IF YOU WILL BE DOING THE BAKING FOR YOUR ONEG, ALL THE FOOD MUST BE PREPARED IN OUR TEMPLE KITCHENS BEFORE SHABBAT AND COORDINATED WITH THE OFFICE STAFF.
3. A list of available Bakeries is enclosed with this form. Please indicate above who from your family will be onsite to oversee the delivery of your food from the caterer.
4. Please make sure to leave the kitchen in the condition you found it in if you are baking in a TBS kitchen [please note: there will be a \$50 charge if the custodian or a service is required to clean-up the kitchen when you are done!].
5. IN ADDITION, YOU WILL NEED TO PROVIDE THE FOLLOWING FOR YOUR ONEG... THANK YOU!

Friday Night Oneg– Responsibility of Family

<p>_____ Grape Juice</p> <p>_____ Challah</p> <p>_____ Parve Cookies/Cake (NON-DAIRY)</p> <p>_____ Coffee (Regular and Decaf)</p> <p>_____ Tea</p>	<p>_____ Parve Creamer (Coffee Rich)</p> <p>_____ Juice/Soda/Seltzer</p> <p>_____ ALL PAPER PRODUCTS... (tablecloths, plates, cups, napkins, utensils)</p>
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6. Please check if you wish Temple Beth Shalom to supply the following items:

_____ Birkat Hamazon Books _____ Tables (Round and Long)

***Please return this completed form to the office at the address listed above
at least four weeks prior to your event***

Thank you!

Submitted by _____ Phone # _____ Date _____