



יהוה בן יהוה
**IS EXALTED AS HEAD
 ABOVE ALL**
 1 CHRONICLES 29:11

יהוה בן יהוה IS MIGHTY, HE WILL SAVE US
 ZEPHANIAH 3:17

Soon we are to observe the month of Abib, the first month of the Hebrew solar year, for it was in this month that the Lord, יהוה, our God delivered us from Egypt. And on the fourteenth day of Abib, at even, we are to keep the Passover of the Lord, יהוה; followed the next day with the Feast of Unleavened Bread for seven days (Leviticus 23:5; Deuteronomy 16:1).

All of Israel must gather before יהוה at this sacred occasion during its appointed season in the place where He has chosen to place His magnanimous and worshipful name (Exodus 12:17; Numbers 9:2).

We must keep the Passover and Feast of Unleavened Bread for a memorial forever; for with a strong hand יהוה, brought our forefathers out of Egypt. We must also remember that יהוה brought again the waters of the Red sea upon Pharaoh and his chariots, but then He caused the children of Israel to cross in the midst of the sea on dry land (Exodus 12:13-14, 13:9, 15:19).

In retrospect, it is יהוה who has made His wonderful works to be remembered: He is gracious and full of compassion (Psalm 111:4). For when we recall how יהוה moved throughout Egypt smiting all the firstborn in that land while passing over Israel's houses that were marked with the blood of a lamb, we recognize how this memory is connected today, to יהוה בן יהוה our Passover; the sacrificial Lamb of God, יהוה. In Him is the renewed promise of deliverance from the penalties and consequences of the sins of this world (Zephaniah 3:17;

John 1:29; 1 Corinthians 5:7; 1 John 3:4).

Therefore, wait upon יהוה בן יהוה until the day that He rise

up to the prey: for His determination is to gather the nations, that He may assemble the kingdoms, to pour upon them His indignation . . . : for all the Earth shall be devoured with the fire of His jealousy. No matter what, יהוה בן יהוה **Is Mighty, He Will Save Us** (Zephaniah 3:8, 17).

Just as Moses was chosen to lead the Hebrews through the wilderness, so was יהוה בן יהוה manifested to take away our sins and to destroy the works of the devil who committed sin from the beginning (Psalm 105:26; 1 John 3:5, 8).

Sin is the transgression of the law—not man's law, but the commandments, judgements, laws, and statutes of יהוה (1 John 3:4). This is why it is so significant that we obey the commandment to keep the Passover and Feast of Unleavened Bread from year to year.

Thus, as we count down the days until Passover, utilize this time to get your travel needs ready, and prepare spiritually—removing all the old leaven of malice and wickedness; so that you may come before יהוה בן יהוה with the unleavened bread of sincerity and truth; as you keep in mind that He, יהוה בן יהוה **Is Exalted As Head Above All** (1 Chronicles 29:11; 1 Corinthians 5:8).

Attend the Passover and Feast of Unleavened Bread with us, to be held at the Embassy Suites Hotel, Katy Freeway, in Houston, Texas from April 1 through April 8, 2025. **NO WALK-INS! Registration is required by February 24, 2025.**

AS OF
 FEBRUARY 7, 2025
53 DAYS LEFT

As Israel, you would never think of coming to a city and not staying at the place where יהוה chooses to place His name.
 יהוה בן יהוה in *A Global Call To The Remnant* on pages 117-18



WE ARE THE FAMILY OF יהוה. THEREFORE, COME TOGETHER IN THE "ONE" PLACE THAT יהוה HAS CHOSEN TO PLACE HIS NAME THAT WE MIGHT COMFORT AND EDIFY ONE ANOTHER, THAT OUR HEARTS MIGHT BE COMFORTED, BEING KNIT TOGETHER IN LOVE AS "ONE" FAMILY. (1 THESSALONIANS 5:11; COLOSSIANS 2:2)

The feast guest chamber is the luxurious **Embassy Suites Houston West-Katy**. This modern, all suite hotel is conveniently located on the south side of I-10. Take the *Park Ten* exit heading from either east or west on I-10. It is only 30 miles from George Bush Intercontinental Airport and 35 miles from William P. Hobby Airport. Guests will enjoy an upscale experience and feel right at home with the spacious two-room suites.



EMBASSY SUITES
 HOUSTON WEST-KATY
 16435 KATY FREEWAY
 HOUSTON, TX 77094
 (281) 398-0900

CONVENTION DATES

APRIL 1 - 8, 2025

Pre-registration for **Passover/Feast of Unleavened Bread** is \$890 per person for 8 days. **Pre-register** by February 17, 2025, and **SAVE \$80**. After February 17, 2025, the registration fee is \$970 for 8 days or a \$130 daily rate. Last date to register is February 24, 2025.

Pre-registration, housing, and meals for **Passover/Feast of Unleavened Bread** is \$1,670 per person for 8 days. **Pre-register** by February 17, 2025 and **SAVE \$150**. *PLEASE SEE CONVENTION REGISTRATION FORMS FOR A COMPLETE LIST OF RATES.

For יהוה בן יהוה daily gives wisdom; from out of His mouth come knowledge and understanding. Eat the words of יהוה בן יהוה daily and live! For man shall not live by bread alone but by "every word" that proceedeth out of the mouth of יהוה בן יהוה daily
 (Proverbs 2:6; Matthew 4:4).



JOIN US IN A "SPIRITUAL" BANQUET AND RELISH IN OUR SAVORY NIGHTLY CLASSES AND DELECTABLE DAILY SEMINARS AS YOU EAT TO THE FULL. BE SURE TO TRAVEL WITH YOUR **STUDY TOOLS** SO THAT YOU MAY PARTICIPATE IN ALL OF OUR FAMILY STUDY SESSIONS!!



REMEMBER: Our Feast is an Holy Occasion—Please dress appropriately!

FULL CULTURE
 OR **BUSINESS ATTIRE**

MENU FOR FEAST OF UNLEAVENED BREAD 6028

APRIL 2

Brown Lentil & Spinach Soup
Eastern Salad: Radish, Shredded Carrots, Green Onions, Cucumbers, and Candied Pecans on a bed of Red Leaf Lettuce

Lo Mein Noodles tossed in olive oil & garlic w/Teriyaki sauce (on the side)
Stir-Fried Broccoli, Red Bell Peppers, Baby Corn, Purple Cabbage, Onions, and Garlic
Unleavened Bread
Blueberry Muffins
Herbal Tea/Coffee

APRIL 3

Vegetable Soup
Roasted Beet Salad: Roasted Beets, Red Onions, Tomatoes, Palm Hearts, and Roasted Pumpkin Seeds on a bed of Green Leaf Lettuce
Seasoned Garbanzo Beans w/herbs
White Basmati Rice
Garlic-Butter Sautéed Asparagus
Unleavened Bread
Apple Cinnamon Blondie
Herbal Tea/Coffee

APRIL 4

Vegan Chili
Greek Salad: Cucumbers, Black Olives, Tomatoes, Chickpeas, Red & Green Bell Peppers, Fresh Cilantro, and Feta Cheese on a bed of Spinach Leaves
Baked Potato w/sour cream & chives (on the side)
Assorted Vegetables: Broccoli, Cauliflower, and Squash
Unleavened Bread
Chocolate Nut Clusters
Herbal Tea/Coffee

APRIL 5

Vegetable Barley Soup
Garden Pasta Salad: Cucumbers, Tomatoes, Kalamata Olives, Sliced Onions, and Bell Peppers (on a bed of Spinach leaves)
Pinto Beans w/Herbs and Olive Oil
White Basmati Rice

Fried Green Cabbage w/garlic, onions, and red bell peppers
Unleavened Bread
Parfait w/Blueberry Syrup and Whipped Cream
Herbal Tea/Coffee

APRIL 6

Navy Bean & Vegetable Soup
Italian Salad: Whole Pepperoncini, Onions, Parmesan Cheese, Fresh Basil, Cucumbers, Green Olives, and Artichoke Hearts on a bed of Arugula
Capellini tossed in olive oil & herbs w/marinara and cream sauces (on the side)
Roasted Garlic-Buttered Broccoli, Cauliflower, and Carrots
Unleavened Bread
Flourless Chocolate Cake
Herbal Tea/Coffee

APRIL 7

Vegetarian Corn Chowder
Mediterranean Salad: Chickpeas, Grape Tomatoes, Cucumbers, Pickled Red Onions, Kalamata Olives, and Fresh Mint on a bed of Arugula and Spinach
Black Beans w/Garlic & Herbs
White Basmati Rice
Sautéed Kale & Spinach w/olive oil, garlic & onions
Unleavened Bread
Unleavened Cookies
Herbal Tea/Coffee

APRIL 8

Brown Lentil and Spinach Soup
Romaine Lettuce, Cheddar, Spiced Walnuts, Shredded Carrots, and Onions, and Green Olives
Noodles Tossed in Olive Oil, Fresh Garlic and Ginger w/Teriyaki Sauce (on the side)
Stir-Fried Broccoli, Napa Cabbage, Baby Corn, Red Bell Peppers, Onions, and Garlic
Unleavened Bread
Chocolate Nut Clusters
Herbal Tea/Coffee



BREATH OF LIFE SYSTEMS

provides transportation to and from the William P. Hobby Airport.

\$80 per person (round trip)
\$60 per person (one way)

*Children age 3 and under free

If you need transportation to and from the George Bush Intercontinental Airport, you must call for **availability and pricing.**

A \$10 discount per person will apply to a family of 5 or more within the same household.

To make reservations, please call (702) 300-4452 or email to nachshownyisrael@gmail.com.

***Must call or email at least 24 hours in advance to make reservations.**

HOTEL PARKING

Self Parking
Outdoor Parking Lot

SPECIAL NOTICE!

We kindly ask that you contact us via email to let us know that "something is on the way" after mailing in your registration and/or feast performance(s). This will notify us that you have sent such and we will be on the lookout for it. Please use the address below:

feastcommittee@satx.rr.com

CANCELLATION POLICY

If you make reservations to stay at the host hotel during our feast and/or register for our nightly classes and will not arrive on the date stated on your registration form (flight canceled, will not be able to attend, and so on), please notify The Feast Committee **48 HOURS IN ADVANCE** so we can cancel your room reservation or your ballroom seating reservation. If you fail to do this, **you**

will be billed for the hotel room or not receive a registration refund. To cancel, you must call **The Feast Committee Registration Office** at **(832) 349-4203** after March 22, 2025.

NO REFUNDS ON ADVANCED RESERVATIONS IF THE ABOVE PROCEDURES ARE NOT FOLLOWED.

IF YOU ARE UNABLE TO ATTEND THE FEAST AND WOULD LIKE TO RECEIVE A CONVENTION SET, VISIT OUR ON-LINE BOOKSTORE AT YAHWEHBENYAHWEH.COM AFTER THE FEAST TO ORDER. OFFER ENDS MAY 13TH.

FEAST PERFORMANCE GUIDELINES

In keeping with the standards that יהוה בן יהוה established for our nation, The Feast Committee has instituted the following performance guidelines to ensure that we continue to show respect and reverence toward His moral teachings. Therefore, to be in accord with Titus 2:1-8, 10, all—adults as well as children—wishing to perform during our nightly program must adhere to the performance criteria listed below:

- A. Our Passover and Feast of Unleavened Bread 6028** theme is: **"יהוה בן יהוה Is Mighty, He Will Save Us"** (Zephaniah 3:17) and our overall theme for the year is: **"יהוה בן יהוה Is Exalted As Head Above All"** (1 Chronicles 29:11). All performances must reflect research done on either the themes, the feasts, KJV Bible stories, or parables. **The use of online dictionaries and thesauruses are prohibited as credible sources of reference.**

All performers must wear either "full" culture or "full" business attire. All diadems worn must have the standard "V" wrap. No sheer or revealing fabrics, as well as no form-fitting, low-cut, or form-showing garments should be worn. Sisters must wear long, ankle-length, free-flowing outer cultural garments (tops, skirts, or dresses). Brothers must wear loose-fitting, ankle-length cultural pants. Arms must

be covered, and legs must be covered with appropriate leg stockings. No one with unclean garments, shoes, or diadems, and wearing false fingernails and makeup—lip gloss, lip stick, mascara, eye shadow, and the like—will be permitted to perform.

- B. All performers must submit a video format for all proposed performances.** Video formats must be qualitative, audible, and accompanied by the type-written words/lyrics of the song, recitation, poem, play, and music voiceovers. Voiceovers should be readings or recitations that are in accord with paragraph one of section A of our guidelines. Your performance must not exceed seven (7) minutes. No rough drafts will be accepted. All submissions must be in their "final" stage.

- C. Recitations:** All recitations, plays, poems, welcomes, exordiums, including HIA, must adhere to paragraphs A and B above.

- D. Music/Songs:** All singers and musicians must adhere to paragraphs A and B above. In addition, no singing or playing of secular (worldly) songs to יהוה בן יהוה or יהוה אלהים. **Except for spirituals created before 1920, the use of secular samples, melodies, or any portion of worldly music as original compositions is prohibited. Any one found violating this guideline shall be suspended from performing.** Music choices are: יהוה music and "original" songs, instrumentals, and/or jazz compositions. All instrumental

and jazz compositions must be accompanied by Scriptural or poetic voiceovers. (Persons doing the voiceovers, if not appearing on the stage, do not have to appear on your video submission.)

- E. Dances:** All dancers must adhere to paragraphs A and B above. In addition, dances must have a moral message. All instrumental dance music must be accompanied by voiceovers as stated in paragraph D. Dances must exemplify cultural connotations that represent the principles of chastity as taught by יהוה בן יהוה. Body movements should not be suggestive or sexually explicit, i.e., hip thrusts, hip rolls, gyrations, or clutching of the breast or crotch area.

All performances must be sent to The Feast Committee by **February 24, 2025. Any performance received without registration is denied.** The Feast Committee will respond to all unacceptable performances by **March 26, 2025.** Please mail your performance(s) to **The Feast Committee, P.O. Box 1138, Seguin, TX 78156.**



CONVENTION REGISTRATION

**REGISTRATION REQUIRED. NO WALK-INS.
ONE FORM PER REGISTRANT.**

Please type or print

Brother Sister Name: _____

Name Preferred on Badge: _____ **This is my first Feast**

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____ Email: _____

Number of Children: _____ Ages: _____, _____, _____, _____, _____, _____, _____, _____, _____

8-DAY PACKAGE DEALS <i>(18 years and above)</i>	By February 17	After February 17
Registration/Housing/Meals Package Includes registration, housing reservations, 1 Passover meal, and 7 daily meals	<input type="checkbox"/> \$1,670	<input type="checkbox"/> \$1,820
Registration/Housing Package Includes registration, housing reservations, and 1 Passover meal	<input type="checkbox"/> \$1,545	<input type="checkbox"/> \$1,695
Registration Package Includes registration and 1 Passover meal	<input type="checkbox"/> \$890	<input type="checkbox"/> \$970
7-Day Meal Package	<input type="checkbox"/> \$231	<input type="checkbox"/> \$231

NOTE: No personal checks will be accepted. (Checks will be promptly returned to you without notification. If the replacement money order or cashier's check is not postmarked by February 17, 2025, you must pay the regular registration rate.) **NO PARTIAL PAYMENTS.**

MAIL FORM AND PAYMENT TO:

THE FEAST COMMITTEE
P. O. Box 1138
Seguin, TX 78156
PHONE: (210) 678-3062

**THE LAST DATE TO MAIL YOUR REGISTRATION
TO THE FEAST COMMITTEE IS
FEBRUARY 24, 2025.**

DAILY RATES - BY FEBRUARY 17 <i>(18 years and above)</i>	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8	Sub-Total
Daily Registration/Housing/Meal Includes registration, housing reservation, and 1 daily meal	X	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	<input type="checkbox"/> \$240	\$ _____
Daily Registration/Housing Includes registration and housing reservation	<input type="checkbox"/> \$220 1 P/O meal	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215	<input type="checkbox"/> \$215	\$ _____
Daily Registration	<input type="checkbox"/> \$125 1 P/O meal	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	\$ _____
Daily Meal	X	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	\$ _____

DAILY RATES - AFTER FEBRUARY 17 <i>(18 years and above)</i>	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8	Sub-Total
Daily Registration/Housing/Meal Includes registration, housing reservation, and 1 daily meal	X	<input type="checkbox"/> \$260	<input type="checkbox"/> \$260	<input type="checkbox"/> \$260	<input type="checkbox"/> \$260	<input type="checkbox"/> \$260	<input type="checkbox"/> \$260	<input type="checkbox"/> \$260	\$ _____
Daily Registration/Housing Includes registration and housing reservation	<input type="checkbox"/> \$240 P/O meal	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235	<input type="checkbox"/> \$235	\$ _____
Daily Registration	<input type="checkbox"/> \$135 P/O meal	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	\$ _____
Daily Meal	X	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	\$ _____

HOTEL RESERVATION INFORMATION

(For persons staying at the Embassy Suites Hotel.)

**ROOMS ARE DOUBLE OCCUPANCY. LIMITED
ROOMS ARE AVAILABLE.**

Hotel check-in time: 4:00 pm, April 1

Hotel check-out time: 11:00 am, April 9

Name for Hotel Reservation: _____

Check-In Date: _____

Check-Out Date: _____

EXTRAS	Amount	Number	Sub-Total
Passover Meals for Children 17 years and under	<input type="checkbox"/> \$2 per child	_____	\$ _____
Early Arrivals - Before April 1	<input type="checkbox"/> \$178 per night	_____	\$ _____
Late Departures - After April 8	<input type="checkbox"/> \$178 per night	_____	\$ _____

TOTAL ENCLOSED: \$ _____

MONEY ORDER(S) CASHIER'S CHECK(S)
MAKE PAYABLE TO: THE FEAST COMMITTEE

SINGLE PARENT WITH CHILD(REN) OR IF YOU PREFER SINGLE-HOUSING

**REGISTRATION REQUIRED. NO WALK-INS.
ONE FORM PER REGISTRANT.**

Please type or print

Brother Sister Name: _____

Name Preferred on Badge: _____ **This is my first Feast**

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____ Email: _____

Number of Children: _____ Ages: _____, _____, _____, _____, _____, _____, _____, _____, _____

8-DAY PACKAGE DEALS <i>(18 years and above)</i>	Before February 17	After February 17
Registration/Housing/Meals Package Includes registration, housing reservations, 1 Passover meal, and 7 daily meals	<input type="checkbox"/> \$2,270	<input type="checkbox"/> \$2,420
Registration/Housing Package Includes registration, housing reservations, and 1 Passover meal	<input type="checkbox"/> \$2,120	<input type="checkbox"/> \$2,270
Registration Package Includes registration and 1 Passover meal	<input type="checkbox"/> \$890	<input type="checkbox"/> \$970
7-Day Meal Package	<input type="checkbox"/> \$231	<input type="checkbox"/> \$231

NOTE: No personal checks will be accepted. (Checks will be promptly returned to you without notification. If the replacement money order or cashier's check is not postmarked by February 17, 2025, you must pay the regular registration rate.) **NO PARTIAL PAYMENTS.**

MAIL FORM AND PAYMENT TO:

THE FEAST COMMITTEE
P. O. Box 1138
Seguin, TX 78156
PHONE: (210) 678-3062

THE LAST DATE TO MAIL YOUR REGISTRATION TO THE FEAST COMMITTEE IS FEBRUARY 24, 2025.

DAILY RATES - BEFORE FEBRUARY 17 <i>(18 years and above)</i>	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8	Sub-Total
Daily Registration/Housing/Meal Includes registration, housing reservation, and 1 daily meal	X	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	<input type="checkbox"/> \$305	\$ _____
Daily Registration/Housing Includes registration and housing reservation	<input type="checkbox"/> \$285 1 P/O meal	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280	<input type="checkbox"/> \$280	\$ _____
Daily Registration	<input type="checkbox"/> \$125 1 P/O meal	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	<input type="checkbox"/> \$120	\$ _____
Daily Meal	X	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	\$ _____

DAILY RATES - AFTER FEBRUARY 17 <i>(18 years and above)</i>	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8	Sub-Total
Daily Registration/Housing/Meal Includes registration, housing reservation, and 1 daily meal	X	<input type="checkbox"/> \$325	<input type="checkbox"/> \$325	<input type="checkbox"/> \$325	<input type="checkbox"/> \$325	<input type="checkbox"/> \$325	<input type="checkbox"/> \$325	<input type="checkbox"/> \$325	\$ _____
Daily Registration/Housing Includes registration and housing reservation	<input type="checkbox"/> \$305 1 P/O meal	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	<input type="checkbox"/> \$300	\$ _____
Daily Registration	<input type="checkbox"/> \$135 1 P/O meal	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	<input type="checkbox"/> \$130	\$ _____
Daily Meal	X	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	<input type="checkbox"/> \$33	\$ _____

HOTEL RESERVATION INFORMATION
(For persons staying at the Embassy Suites Hotel.)

LIMITED ROOMS ARE AVAILABLE.

Hotel check-in time: 4:00 pm, April 1
Hotel check-out time: 11:00 am, April 9

Name for Hotel Reservation: _____

Check-In Date: _____

Check-Out Date: _____

EXTRAS	Amount	Number	Sub-Total
Passover Meals for Children 17 years and under	<input type="checkbox"/> \$2 per child	_____	\$ _____
Early Arrivals - Before April 1	<input type="checkbox"/> \$178 per night	_____	\$ _____
Late Departures - After April 8	<input type="checkbox"/> \$178 per night	_____	\$ _____

TOTAL ENCLOSED: \$ _____

MONEY ORDER(S) CASHIER'S CHECK(S)
MAKE PAYABLE TO: THE FEAST COMMITTEE

PERFORMANCE SUBMISSION(S)

Please check who this form is applicable to: Individual Parent with child(ren) Group

GROUPS: If you have submissions for more than one group, please fill out a separate form for each group. If you need additional forms, please visit our website at www.yahwehbenyahweh.com, and click on the **Feasts of הַחַדְשׁ** button. Only one contact person is permitted to submit this form, all video formats, and type-written words for the group (even if participants are in various cities).

SUBMISSION GUIDELINES:

- Each performance must not exceed **seven** minutes.
- All performances must be submitted on **video formats** with the **type-written words**.
- Your live performance(s) must be identical to your mailed-in submission(s).
- **Any performance(s) received without paid registration is immediately denied.**
- Your submitted performance dates must match your paid registration dates.

EXORDIUMS	Length of Time	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8
Name of person:	___ : ___	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Name of person:	___ : ___	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Name of person:	___ : ___	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

WELCOMES	Length of Time	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8
Name of person:	___ : ___	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Name of person:	___ : ___	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Name of person:	___ : ___	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

PERFORMANCE TITLE	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8
	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Description	<input type="checkbox"/> Song <input type="checkbox"/> Poem <input type="checkbox"/> Dance <input type="checkbox"/> Play <input type="checkbox"/> Recitation			___ # of mics	___ : ___ Length of Time			
Names of participants in group performance (if any):								

PERFORMANCE TITLE	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8
	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Description	<input type="checkbox"/> Song <input type="checkbox"/> Poem <input type="checkbox"/> Dance <input type="checkbox"/> Play <input type="checkbox"/> Recitation			___ # of mics	___ : ___ Length of Time			
Names of participants in group performance (if any):								

PERFORMANCE TITLE	Tue April 1	Wed April 2	Thu April 3	Fri April 4	Sat April 5	Sun April 6	Mon April 7	Tue April 8
	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
Description	<input type="checkbox"/> Song <input type="checkbox"/> Poem <input type="checkbox"/> Dance <input type="checkbox"/> Play <input type="checkbox"/> Recitation			___ # of mics	___ : ___ Length of Time			
Names of participants in group performance (if any):								

CONTACT INFORMATION

Submitted by: _____ Group Name (if any): _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____ Email: _____