



**Remember: I Am יהוה And There Is None Else** Isaiah 46:9

**יהוה בן יהוה Will Save His People In Truth** Zechariah 8:7-8

**Remember: I am יהוה and there is none else.**

Therefore what doth יהוה your God require of you? Keep the **Feast of Tabernacles** in the seventh month for seven days unto the Lord, יהוה. On the eighth day shall be a Holy Convocation: it is a solemn assembly; and you shall do no servile work therein (Isaiah 46:9; Deuteronomy 10:12; Leviticus 23:34-36).

During this period of time, all that are Israelites born shall dwell in booths: that your generations may know that יהוה your God made the children of Israel to dwell in booths, when He brought them out of the land of Egypt (Leviticus 23:42-43).

A booth represents a temporary dwelling. Therefore, Israel, you are required to appear in the place where יהוה has chosen to place His name and dwell there temporarily for eight days. In addition, you, your family, your employees, the stranger, the fatherless, and the widow shall rejoice in your feast: because יהוה your God shall bless you in all your increase, and in all the works of your hands, therefore you shall surely rejoice (Deuteronomy 16:14-15).

And you shall not appear before יהוה empty handed, every man shall give as he is able, according to the blessing which יהוה your God hath given you (Deuteronomy 16:16-17).

This final feast which is held at the end of the agricultural year is also known as the **Feast of Ingathering**, when one has gathered in his labors out of the field (Exodus 23:16, 34:22). This feast is tied to Israel's history, but more importantly her future.

It is written that a *Day of Ingathering* shall come when יהוה gathers the good people out of the field

and places them into a place of safety, while the wicked are being gathered together too, but to be burned as the chaff and stubble with unquenchable fire (Matthew 3:12, 13:30; Malachi 4:1).

This scenario is known as the final harvest or judgment which occurs at the end of this world as we know it (Matthew 13:39-40). But before this happens, a great day takes place in a particular feast, wherein יהוה בן יהוה Himself, shall stand and cry, saying, "If any man thirst, let him come unto Me, and drink" (John 7:37).

This is an open invitation. So those who are looking for spiritual guidance that have ears to hear let him hear. For יהוה בן יהוה **Will Save His People In Truth and In Righteousness** (Zechariah 8:7-8).

Therefore, do not attempt to make the covenant of none effect for you and your family, but keep your part of the agreement and follow the commandments of יהוה regarding His feast and holy convocations so that you might obtain the realization of the promise.

Finalize your plans to come worship before the King of Israel, יהוה בן יהוה, September 29 through October 6, 2020; in the only place where He has placed His holy and righteous name: the **Embassy Suites Houston West-Katy**, in Houston, Texas. Registration is **required**, so preregister now for **all eight nights!**

**Note:** **Feast of Tabernacles** is to remind you of your history, as well as to take notice of things to come. And by studying the Word of יהוה, you can see the pitfalls of rejecting Him and His laws.

**"If you love Me, keep My commandments."** John 14:15

AS OF JULY 15, 2020

**76 DAYS LEFT**



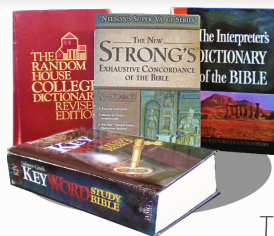
**Y**ou arrange your business and your affairs to come when “I” tell you. So when the . . . Feast of Tabernacles come, you will be there. That is not even a question. You don’t have a choice, once you receive the law. Even if you have to start walking, you will get there; and you will not come empty-handed, neither will you come without money, . . .

יהוה בן יהוה in *The Signs, Wonders, and Mighty Hand of יהוה* on page 82

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



*“And יהוה בן יהוה commanded the multitude to sit down on the grass, and took the five loaves, and the two fishes, and looking up to Heaven, He blessed, and broke, and gave the loaves to His disciples, and **the disciples to the multitude**. And they did all eat, and were filled . . .” (Matthew 14:19-20)*

There will be enough “spiritual” delicacies for you to eat to the full in our nightly classes and daily seminars. Therefore, travel with your **study tools** to be able to participate in all of our family study sessions!!



## Convention Dates

### September 29 - October 6, 2020

Pre-registration for **Feast of Tabernacles / Holy Convocation** is \$865 per person for 8 days. **Pre-register** by August 7, 2020, and **SAVE \$80**. After August 7, 2020, the registration fee is \$945 for 8 days or a \$125 daily rate.

Pre-registration, housing, and meals for **Feast of Tabernacles / Holy Convocation** is \$1,645 per person for 8 days. **Pre-register** by August 7, 2020 and **SAVE \$150**. \*PLEASE SEE CONVENTION REGISTRATION FORMS FOR A COMPLETE LIST OF RATES.

## VIP SEATING

The first 75 persons to pre-register will receive Guaranteed Reserved nightly VIP seating up until 7pm.



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

**Full Culture  
or Business Attire**



# MENU FOR FEAST OF TABERNACLES 6023

## September 30

Lentil-Spinach Soup  
Green Leaf Lettuce, Grape  
Tomatoes, Basil, Red Onions,  
Black Olives, Fresh Mozzarella,  
and Cracked Pepper  
Angel Hair Pasta  
Grilled Squash and Zucchini  
Marinara (on the side)  
Garlic French Bread  
Chocolate Cake with  
Peanut Butter Drizzle  
Herbal Tea/Coffee

## October 1

Potato-Leek Soup  
Butter Leaf Lettuce, Cheddar,  
Spiced Walnuts, Cranberries, and  
Shaved Onions  
Pinto Beans and Yellow Rice  
Balsamic Grilled Asparagus  
Apple Cinnamon Blondie  
Pumpnickel Bread Rolls  
Herbal Tea/Coffee

## October 2

Minestrone Soup  
Red Leaf Lettuce with Cous Cous,  
Cherry Tomatoes, Pistachios,  
Celery, and Red Onions  
Baked Potato served with Pico De  
Gallo, Sour Cream, and  
Cheddar (on the side)  
Steamed Broccoli and Cauliflower  
Multigrain Bread Rolls  
Key Lime Pie  
Herbal Tea/Coffee

## October 3

Vegetable Soup  
Mixed Greens with Roasted  
Butternut Squash, Diced Celery  
Vegetables, and Toasted  
Pumpkin Seeds  
Red Beans and  
Herb Wild Rice Pilaf  
Braised Cabbage  
Lemon Tart

Whole Wheat Bread Rolls  
Herbal Tea/Coffee

## October 4

Tomato-Basil Soup  
Field Greens, Cherry Tomatoes,  
Shredded Carrots, Cucumbers,  
Shaved Onions, and Green Olives  
Garlic-Herb Tossed Fettuccine  
Alfredo Sauce (on the side)  
Sautéed Spinach with  
Blistered Tomatoes  
Garlic French Bread  
Peach Cobbler  
Herbal Tea/Coffee

## October 5

Vegetarian French Onion Soup  
Field Greens with Garden Pasta  
Salad, Cucumbers, Tomatoes,  
Kalamata Olives, Sliced Onions,  
and Peppers  
Black Beans and Stir-Fried Yellow  
Rice with Onions and  
Shredded Carrots  
Roasted Corn with Green Onions  
and Red Peppers  
Pumpnickel Bread Rolls  
Carrot Cake  
Herbal Tea/Coffee

## October 6

Lentil-Spinach Soup  
Wild Arugula and Baby Spinach  
Leaves, Roasted Beets,  
Caramelized Cipollini Onions,  
Feta Cheese, and Toasted Walnuts  
White Basmati Rice  
Stir Fry of Broccoli Florets, Sliced  
Bell Peppers, Snow Peas, Water  
Chestnuts, and Baby Corns  
Vegetable Spring Rolls with  
Sweet Chili and Cilantro  
Sauce (on the side)  
Multigrain Bread Rolls  
Pumpkin Spice Cake  
Herbal Tea/Coffee



## Breath of Life Systems

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

\$70 per person (round trip)

\$40 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  
nachshownisrael@yahoo.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 add our  
email address to your electronic  
address book:

**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 September 20,  
2020.

**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  
November 14th.***



# 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 Feast of Tabernacles and Holy Convocation 6023** theme is: **בן יהוה יהוה Will Save His People In Truth** (Zechariah 8:7-8) and our overall theme for the year is: **"Remember: I Am יהוה and There Is None Else"** (Isaiah 46:9). All performances must reflect research done on either the themes, the feasts, KJV Bible stories, or parables. **The use of on-line dictionaries and thesauruses are prohibited as creditable 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 there "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 or יהוה בן יהוה. **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 **August 21, 2020. Any performance received without registration is denied.** The Feast Committee will respond to all unacceptable performances by **September 24, 2020.** Please mail your performance(s) to **The Feast Committee, P.O. Box 1138, Seguin, TX 78156.**



# CONVENTION REGISTRATION

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 (18 years and above)	Before August 7	After August 7
<b>Registration/Housing/Meals Package</b> Includes registration, housing reservations, and 7 daily meals	<input type="checkbox"/> \$1,645	<input type="checkbox"/> \$1,795
<b>Registration/Housing Package</b> Includes registration and housing reservations	<input type="checkbox"/> \$1,520	<input type="checkbox"/> \$1,670
<b>Registration Package</b>	<input type="checkbox"/> \$865	<input type="checkbox"/> \$945
<b>7-Day Meal Package</b>	<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 August 7, 2020, 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

**DO NOT MAIL YOUR REGISTRATION FEES  
TO THE FEAST COMMITTEE AFTER  
AUGUST 21, 2020.**

DAILY RATES - BEFORE AUGUST 7 (18 years and above)	Tue Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6	Sub-Total
<b>Daily Registration/Housing/Meal</b> Includes registration, housing reservation, and 1 daily 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	\$ _____
<b>Daily Registration/Housing</b> Includes registration and housing reservation	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	<input type="checkbox"/> \$210	\$ _____
<b>Daily Registration</b>	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	\$ _____
<b>Daily Meal</b>		<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 AUGUST 7 (18 years and above)	Tue Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6	Sub-Total
<b>Daily Registration/Housing/Meal</b> Includes registration, housing reservation, and 1 daily meal		<input type="checkbox"/> \$255	<input type="checkbox"/> \$255	<input type="checkbox"/> \$255	<input type="checkbox"/> \$255	<input type="checkbox"/> \$255	<input type="checkbox"/> \$255	<input type="checkbox"/> \$255	\$ _____
<b>Daily Registration/Housing</b> Includes registration and housing reservation	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	<input type="checkbox"/> \$230	\$ _____
<b>Daily Registration</b>	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	\$ _____
<b>Daily Meal</b>		<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, September 29

Hotel check-out time: 11:00 am, October 7

Name for Hotel Reservation: \_\_\_\_\_

Check-In Date: \_\_\_\_\_

Check-Out Date: \_\_\_\_\_

EXTRAS	Amount	Number	Sub-Total
<b>Early Arrivals</b> - Before Sep 29	<input type="checkbox"/> \$169 per night	_____	\$ _____
<b>Late Departures</b> - After Oct 6	<input type="checkbox"/> \$169 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

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 (18 years and above)	Before August 7	After August 7
<b>Registration/Housing/Meals Package</b> Includes registration, housing reservations, and 7 daily meals	<input type="checkbox"/> \$2,250	<input type="checkbox"/> \$2,400
<b>Registration/Housing Package</b> Includes registration and housing reservations	<input type="checkbox"/> \$2,100	<input type="checkbox"/> \$2,250
<b>Registration Package</b>	<input type="checkbox"/> \$865	<input type="checkbox"/> \$945
<b>7-Day Meal Package</b>	<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 August 7, 2020, 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

**DO NOT MAIL YOUR REGISTRATION FEES  
TO THE FEAST COMMITTEE AFTER  
AUGUST 21, 2020.**

DAILY RATES - BEFORE AUGUST 7 (18 years and above)	Tue Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6	Sub-Total
<b>Daily Registration/Housing/Meal</b> Includes registration, housing reservation, and 1 daily 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	\$ _____
<b>Daily Registration/Housing</b> Includes registration and housing reservation	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	<input type="checkbox"/> \$275	\$ _____
<b>Daily Registration</b>	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	<input type="checkbox"/> \$115	\$ _____
<b>Daily Meal</b>		<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 AUGUST 7 (18 years and above)	Tue Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6	Sub-Total
<b>Daily Registration/Housing/Meal</b> Includes registration, housing reservation, and 1 daily meal		<input type="checkbox"/> \$320	<input type="checkbox"/> \$320	<input type="checkbox"/> \$320	<input type="checkbox"/> \$320	<input type="checkbox"/> \$320	<input type="checkbox"/> \$320	<input type="checkbox"/> \$320	\$ _____
<b>Daily Registration/Housing</b> Includes registration and housing reservation	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	<input type="checkbox"/> \$295	\$ _____
<b>Daily Registration</b>	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	<input type="checkbox"/> \$125	\$ _____
<b>Daily Meal</b>		<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, September 29

Hotel check-out time: 11:00 am, October 7

Name for Hotel Reservation:

Check-In Date: \_\_\_\_\_

Check-Out Date: \_\_\_\_\_

EXTRAS	Amount	Number	Sub-Total
<b>Early Arrivals</b> - Before Sep 29	<input type="checkbox"/> \$169 per night	_____	\$ _____
<b>Late Departures</b> - After Oct 6	<input type="checkbox"/> \$169 per night	_____	\$ _____

**TOTAL ENCLOSED: \$**

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

# PERFORMANCE SUBMISSIONS

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](http://www.yahwehbenyahweh.com), and click on the **Feasts of יהוה** 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 Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6
Name of person:	___ : ___	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of person:	___ : ___	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of person:	___ : ___	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

WELCOMES	Length of Time	Tue Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6
Name of person:	___ : ___	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of person:	___ : ___	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Name of person:	___ : ___	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PERFORMANCE TITLE	Tue Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 Sep 29	Wed Sep 30	Thu Oct 1	Fri Oct 2	Sat Oct 3	Sun Oct 4	Mon Oct 5	Tue Oct 6
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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## CONTACT INFORMATION

Submitted by: \_\_\_\_\_ Group Name (if any): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Email: \_\_\_\_\_