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PLEASE COMPLETE INFORMATION BELOW

Name:

Address:

Tel. Number:

Email Address:

Pickup Date:	First Seder (Wed 4/8)	Second Seder (Thr 4/9)	
Please Circle Pickup Time:	11 AM	1 PM	4 PM

SPECIAL INSTRUCTIONS

PAYMENT INFORMATION

Credit Card Type: **VISA** **MC** **AMEX**

Credit Card Number:

Expiration Date:

Signature

*All food is prepared “kosher style” and is
not certified “Kosher for Passover.”*

ORDERS MAY BE FAXED TO 914-761-5789