TICKET ORDER FORM

To order tickets by mail, send this completed form with a stamped, self-addressed envelope and a check made payable to Rutgers University. Mail-in orders received after October 15 will be held at "will call" during the festival. **Mail to:**

The Bildner Center for the Study of Jewish Life • 12 College Avenue • New Brunswick, NJ 08901

SUPPORT THE RUTGERS JEWISH FILM FESTIVAL

			Tickets for ea Recognition			Opening night dinner receptionReserved seating			
Patro	n orders are due by	October 15 in o	rder to be lis	ted in the Festival	daily progra	am.			
PATRON PACKAGES: \$1,000 Platinum (fo \$700 Gold (for 2)				r 4) \$500 Silver (for 2) \$250 Bronze (for 1)		#	\$		
Festival Discount Package: \$80 (Includes of of your choice; please specify films below.)				ne ticket each to eight films		#	\$		
	Individual Film	Screening		Date and Time	Number of Gene Admissi Tickets (\$12 ea	ral on	Number of Senior Citizen Tickets (\$10 each)	Number of Student Tickets (\$6 each)	
1	Orchestra of Exile)/30, 7:30 p.m.					
2	Life in Stills / Music Man Murray			/1, 12:30 p.m.					
3	Five Brothers			/1, 3:15 p.m.					
4	The Flat			/1, 7:30 p.m.					
5	My Australia			/3, 7:15 p.m.					
6	Remembrance			/3, 9:30 p.m.					
7	Nicky's Family			/4, 11:30 a.m.					
8	The Flat Dusk			/4, 11:45 a.m.					
10	Remembrance			/4, 2:15 p.m. /4, 2:30 p.m.					
11	Foreign Letters			/4, 4:45 p.m.					
12	Hava Nagila (The Movie)			/4, 7:15 p.m.					
13	Orchestra of Exiles			/6, 12:30 p.m.					
14	Free Men			/6, 3:00 p.m.					
15	Lenin in October			/6, 7:00 p.m.					
16	Kaddish for a Friend			/8, 12:30 p.m.					
17	Nicky's Family			/8, 3:00 p.m.					
18	Free Men			/8, 7:30 p.m.					
19	Kaddish for a Friend			/10, 7:00 p.m.					
20	Five Brothers			/10, 9:15 p.m.					
21	The Kibbutz Experiment		11	/11, Noon					
22	Footnote		11	/11, 2:15 p.m.					
23	Hitler's Children		11	/11, 2:30 p.m.					
24	My Australia		11	/11, 4:45 p.m.					
25	Life in Stills / Mus	ic Man Murray	11	/11, 7:15 p.m.					
				TOTAL		x \$12	x \$10	x \$6	
		AMOUN	OF ENCLO	SED PAYMENT:					
NAME	<u> </u>								
ADDF	RESS:								
CITY:				STATE	: ZII	P:			
TELEPHONE (DAY):			(EVENING):						

EMAIL ADDRESS: