

Temple Beth Shalom  
*Bar/Bat Mitzvah* Service Sheet  
Date of Service \_\_\_\_\_

Name (*Bar/Bat Mitzvah*) \_\_\_\_\_

Parents \_\_\_\_\_

Siblings \_\_\_\_\_

**English Readers (if desired)**

p. 197 \_\_\_\_\_

p. 199 \_\_\_\_\_

**Torah Honors**

Passing Scroll \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_, \_\_\_\_\_

Ark opening \_\_\_\_\_, \_\_\_\_\_

Undress/ Dress \_\_\_\_\_, \_\_\_\_\_

**Presentations, Misc (if desired)**

Tallit \_\_\_\_\_

Parents Personal Words \_\_\_\_\_ yes \_\_\_\_\_ no

Photography \_\_\_\_\_ at service \_\_\_\_\_ at rehearsal

Candy at end of service \_\_\_\_\_ yes \_\_\_\_\_ no

Number of guests \_\_\_\_\_ adults \_\_\_\_\_ kids

*Aliyot*

English Name

Hebrew Name

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. Parents \_\_\_\_\_

\_\_\_\_\_

4. *Bar Mitzvah* \_\_\_\_\_

\_\_\_\_\_