

Day of Reflection
Sponsored by Catholic Social Services
Elder Ministry
Group Sign-up Sheet

Church _____
 Club Name _____
 Club Contact Person _____
 Contact Person's Address _____

Total # Attending _____
 Total amount enclosed \$ _____
 Phone # _____

Street _____
 City _____ State _____ Zip _____

Return to:
 Sandra Breakfield
 1123 South Church St.
 Charlotte, NC 28203-4003

Please make your selection and check the appropriate box. Please print name and address of each member attending.

CathConfCtr Hickory Thursday Oct. 29, 2009 10:00 a.m.- 3 p.m.	Queen of Apostles, Belmont, Tuesday, Nov. 10, 2009, 10:30 a.m.- 3 p.m.	St. Paul, Greensboro, Wednesday, Nov. 18, 2009, 10 a.m.-3 p.m..	St. James, Hamlet, Tuesday, Dec. 3, 2009 10a.m.-3p.m.	Last Name	First Name	Address	Parish
				1.			
				2.			
				3.			
				4.			

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				5.			
				6.			
				7.			
				8.			
				9.			
				10.			
				11.			
				12.			