

Mount Saint Macrina Academy Reunion



October 13-15, 2017

Please return this sheet directly to:

*Sister Carol Petrasovich, OSBM
Mt. St. Macrina House of Prayer
510 West Main Street, P.O. Box 878, Uniontown, PA 15401*

*****Please make check payable to: Mt. St. Macrina House of Prayer.*****

Name _____ Class of _____

_____ I will stay the weekend. (\$150.00)

_____ I will not stay at the House of Prayer but will have these meals:

SATURDAY

		<u>#of ppl.</u>				
Breakfast	9:00 am	_____	x	\$ 6.00	=	_____
Lunch (<i>Catered</i>) <i>served</i>	12:30 pm	_____	x	\$10.50	=	_____ <i>*Sat. Lunch at Trinity Center.</i>
Light Supper	6:45 pm	_____	x	\$ 7.50	=	_____

SUNDAY

Brunch 10:30 am _____ x \$10.00 = _____

Coffee/Juice/Tea available at 8:30 am.

TOTAL _____

No Dinner is served Friday evening.

Group Photo Yes _____ No _____

Class Photo Yes _____ No _____

*We will need to have the number for each meal by October 3, 2017
for ordering and shopping.*