Advent by Candlelight

RESERVATION FORM

Space is limited. Reservations will be made in the order reservation forms are received. Please register as soon as possible to guarantee your seat. Reservation is required to attend. Due to the nature of this event, we cannot accept walk-ins.

There is no cost to participate in this event, however you will be asked for a free-will donation during the dinner to help cover expenses. A donation is not expected.

Option 1: Individual Reservation

I want to be included in this beautiful night.

	Lunder	inderstand I will be placed at a table with new friends.												
	Your N	ame:												
	Phone	Num	ber:											
	Email A	Addre	ess:											
	Your ta	ible h	ostess (will co	ntact y	jou ab	out di	nner pl	ans for y	jour tab	ole.			
Opt	ion 2	2: 1	Table	Res	serv	atio	n							
	I want to assemble and reserve a table for my friends and family. (Maximum 8 people per table, including hostess)													
	Hostes	s Nar	ne:											
	Phone Number:													
	Email A	Addre	ess:											
	Please turn in your reservation form ASAP. We do not need to know the name of all of your guests. However, if you are still inviting people, please inform the Parish Office of your tota number of guests by Thanksgiving (November 28). Please circle many people are you planning for your table (maximum 8 including hostess):													
	1	2	3	4	5	6	7	8						
	☐ I hau	e roc	om at m	y table	e and u	ould	be ha	ppy to h	ost othe	r guest	s at mų	j table	•	
	Number of seats available:													
								ne table u plan t						