

August 6th Registration

Mail this registration form by

June 15, 2016

Spaces for participants will be reserved in the order
in which registrations are received

Enclose pre-registration suggested donation of \$15
(\$20 at the door as space allows)

Make check payable to:

Our Day of Hope

Mail to:

Our Day of Hope

PO Box 1774

Fletcher, NC 28732

Bring your lunch according to your dietary needs

Name _____

Address _____

City _____ Zip _____

Email _____

Phone: _____

Check Number: _____

Please send registration form with each payment.

August 5th Registration

Mail this registration form by June 15

Spaces for participants will be reserved in the
order in which registrations are received

Enclose your check of \$50 for each Friday
workshop you wish to attend (Space is limited)

Make check payable and mail to:

Our Day of Hope

PO Box 1774

Fletcher, NC 28732

Register me for:

_____ Mask-making & Story Telling
9:00 a.m. to 11 a.m.

and/or

_____ Secret Future Boxes
1:00 p.m. to 3:00 p.m.

Name _____

Address _____

City _____ Zip _____

Email _____

Phone: _____

Check Number: _____

Please send registration form with each payment.