

Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

# of Adults attending \_\_\_\_ # of children attending over 5 yrs old \_\_\_\_ # under 5 yrs old \_\_\_\_

Total \$ enclosed (\$25 max/family) \_\_\_\_\_ (please make checks payable to St. Linus)

Please mail to:

Natick Catholic Community (Attn: Mike Fair)

44 East Central Street, Natick MA 01760