Caring for W.H.O.S.E. Thanksgiving Day Celebration 2010! Thursday, November 25, 2010 3:00 P.M.

GENERAL INFORMATION

The registration includes one free Thanksgiving Day meal for you and one guest at <u>Ryan's 2415</u> <u>BROWNS BRIDGE ROAD</u>, <u>GAINESVILLE</u>, <u>GA 30504</u>. Eligibility for free meal is for you to be a Widow/Widower; Homeless; Orphan; Single parent; and Elderly. See detail information below.

<u>Widow/Widower</u>: Person in bereavement due to loss of his or her spouse and has not remarried. You and one guest will have a free Thanksgiving Day meal.

<u>Homeless</u>: Person does not have a permanent dwelling. You and one guest will have a free Thanksgiving Day meal.

Luke 14:12-14 - Then he turned to his host. "When you put on a luncheon or a banquet," he said, "don't invite your friends, brothers, relatives, and rich neighbors. For they will invite you back, and that will be your only reward. Instead, invite the poor, the crippled, the lame, and the blind. Then at the resurrection of the righteous, God will reward you for inviting those who could not repay you." New Living Translation (NLT)

<u>Orphan</u>: A child who does not have a parent or legal guardian and is being taken care of by Foster Parent. Foster parent and one orphan child will have a free Thanksgiving Day meal.

<u>Single parent</u>: An unmarried or divorced person who has custody and responsible of taking care of his or her child. You and one child will have a free Thanksgiving Day meal.

<u>Elderly</u>: A Senior Citizen of age 60 or older; Person is born in 1950 or earlier. You and one guest will have a free Thanksgiving Day meal.

REGISTRATION RATES

FREE to ones who meet the requirements of Caring for W.H.O.S.E. listed above.

REGISTRATION FORM

Please complete this form and return by email or printing it out and fax or mail it to:

Caring for W.H.O.S.E. Thanksgiving Day Celebration 2010! c/o Butterfly Journey Ministries.

P.O. Box 564

Flowery Branch, Georgia 30542 USA

Tel: 678.523.2634 Fax: 912.208.0576

Email: butterflyjourney@yahoo.com

Registration by email, fax or mail ends on Friday, November 19, 2010. Due to limited number, we cannot accept registration forms after that date.

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ATTENDEE INFORMATION

Note: All fields are required.			
Last Name	First Name		MI
Mailing Address:			
City:	State:	Zip Code:	
E-Mail:			
Please check all that applies:		ild or guest with you, fill in	
Widow/Widower	Last Name	First Name	Age (of child)
Homeless			
Orphan	1		
Single parent			
Elderly (Senior Citizen) Please check one below:	2. Person's relationship to you		
	☐ Child(ren) ☐ Foster parent ☐ Friend ☐ Relative	_	
I will attend the Caring for	W.H.O.S.E. Thanksgiving Da	y Celebration 2010!	
I will NOT attend the <i>Caring</i>	for W.H.O.S.E. Thanksgivir	ng Day Celebration 2010!	
Although I would like to atte enclosed of any amount to h Homeless; Orphan; Single pa Celebration 2010! Please wr Post Office Box 564, Flower	nelp support the physical and arent; and Elderly toward the rite out check or money orde	d spiritual needs of the Wic e Caring for W.H.O.S.E. Th er and mail to Butterfly Jou	low/Widower; anksgiving Day urney Ministries,
By signing your name below, you ar requirements to participate in the			•
Signature		/	/2010 te
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