Meal Form - Seniors' Luncheon

Monday, Oct. 21, 2024

Reservation Deadline: Sept. 28, 2024

Name (Please Print):		
A	\ddress:	
		Home Phone:
E	Email:	Church Area:
	Festi	ival Luncheon
*	❖ Bruschetta chicken with rice pilaf	
*	Salad and rolls	
*	Apple pie	
*	 Coffee, decaffeinated coffee, herbal teas and iced tea 	
dea		a check payable to "Church of God – Queens." The for postmarked mail is Sept. 28. Please do not include
Please list handicap needs, if any:		

Please make checks payable to: "CHURCH OF GOD – QUEENS"

Mail to: COGWA, 500 DeMott Lane #6293, Somerset, NJ 08873-9998

Please indicate participants and the total amount below:

____ \$10 – Your first name: _____

____ \$10 - Spouse's first name: _____

\$_____ Total

_____ \$10 – Caregiver's first and last name: _____