

DUE FEBRUARY 3, 2025
Please send to: Jenny Bryans
Office of Catechesis
1400 N. Meridian St.
Indianapolis, IN 46202

YES! I WILL BE ATTENDING THE FIESTA!

Please list everyone that will be in attendance and if anyone has any dietary restrictions or allergies. Check the boxes if 18 years or younger, if you give permission to be photographed and include your emergency contact. **Please include \$20 per person**

NAME: _____ 18 years or younger

DIETARY RESTRICTIONS/Allergies: _____

I GIVE PERMISSION TO BE PHOTOGRAPHED

EMERGENCY CONTACT NAME AND NUMBER: _____

NAME: _____ 18 years or younger ☐

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