

# Children's Hope International Picnic July 12, 2008

Parent(s) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ Zip: \_\_\_\_\_

Phone # (       ) \_\_\_\_\_

Email \_\_\_\_\_

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Children Name	Age	Adoptive Country/ or Biological
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**Guests Attending**

Name \_\_\_\_\_

\_\_\_\_\_

Lunch is \$8.00 per person (adults and children) please enclose a check for the total.

\_\_\_\_\_ x \$8.00 = \$ \_\_\_\_\_

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Please make check to:

Children's Hope International    11780 Borman Drive    St. Louis, MO 63146

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[Back to Reunion Picnic 2008](#)