

**Secular Franciscan Order
Our Lady of the Angels Regional Fraternity**

**Chapter of Ministers Meeting 2009
Saturday, November 14, 2009**

**St. Lawrence Retreat Center
Beacon, NY**

Minister's Name: _____

Fraternity: _____

Location: _____

Please check one:

I will attend the Chapter Meeting _____

I am sending a delegate to represent me _____



If sending a delegate, please complete below:

The delegate's name is: _____

**I hereby certify that this delegate is a permanently professed member of my
fraternity.**

Signature of Minister: _____

Others attending as observers (please list names):

**(Include a check for \$30.00 per person for observers)
Please complete and return this form by November 1st to:**

**Kate Asselin, SFO
Regional Secretary
45 Park Avenue, Apt.103
Verona, NJ 07044-2432**