

Name of Organization: _____

Date of Visit: _____ / _____ / _____ Time: _____
Month Day Year

Number of Students: _____ Number of Chaperones: _____
Elementary(K-5) Middle School (6-8) High School (9-12) College

Age Group: Other (please specify)_____

Contact Person: _____

Address: _____

City, State, _____

Zip _____

Telephone: (_____) _____ Fax: (_____) _____

Email: _____

Is this the group's first visit to Saint Augustine's College? Yes No

Do you plan on dining at Saint Augustine's College? Yes No

If yes, please contact our Food Service Provider, ABL Enterprises, at 919-821-7646.

Meal Prices (per person): Breakfast - \$3.50 Lunch - \$4.50 Dinner - \$5.50

Open House Dates: Saturday January 30, 2010

Saturday April 10, 2010