

FUNDRAISING PICNIC



Sunday, September 10, 2017 *(rain or shine)*

Culinarians' Home Foundation

71 Old Tschirky Road - New Paltz, N.Y. 12561



*The Société Culinaire Philanthropique is pleased to announce
the 64th Annual Picnic
benefiting the Culinarians' Home Foundation.*

Jean Le Rouzic, President C.H.F - Pascal Guillotin, President, S.C.P.

Jean F. Claude, Chairman - Jean-Claude Blazy, Honorary co-chairman

Yves Busnel, André Moisan, Maurice Pailleret, Marc J. Sarrazin, Steve Walljasper, co-chairmen

*Raffle,
games,
door prizes
...*

Breakfast

9:30 am-1:00 pm

\$3.00

Danish

With

Starbucks Coffee

Milk/Juices



Menu

Hors D'oeuvres Variés

Vin Blanc

Boeuf Sauce Champignons

Jardinière de Légumes

Vin Rouge

Salade & Fromage

Dessert, Café

Lunch served at 1:30 p.m.

In order to maintain a high standard of safety and comfort, we must curtail the number of guests. Reservations will be on a first come first served basis. **Your check will hold your reservation** (tickets are non-refundable).



**NO TICKETS WILL BE SOLD AT THE DOOR. RESERVE EARLY.
NO RESERVATIONS WILL BE ACCEPTED AFTER AUGUST 17th. NO EXCEPTIONS.**

! *Please note and inform your guests of the following: No tailgating, coolers, outside food and drinks, hard liquor, tents, pets, bicycles, roller blades and scooters are permitted on the grounds. New York Sate Law prohibits the serving of alcoholic beverages to those under the age of 21. It will be the guests responsibility to ensure that this is enforced. No hard liquor will be served at the bar and tables.*

Directions, chartered bus and donations information on back ➡

Please return bottom portion with payment to: Culinarians' Home Foundation

305 East 47th Street, Suite 11B New York, NY 10017 - Tel: (212) 308-0628 Email: info@societeculinaire.com



Name: _____

Address: _____

Phone: _____

Email: _____

Please send me ___ tickets:

___ x \$50.00 adult \$ _____

NEW ___ x \$450.00 for a table of 10 \$ _____

___ x \$80.00 adult with bus \$ _____

___ x \$15.00 child (age 6 to 10) \$ _____

___ x \$40.00 child (age 6 to 10) with bus \$ _____

___ x \$30.00 Bus - round trip/person \$ _____

Total: \$ _____

Guests Names:

Indicate age of children under 6 for seating purposes.

Note: assigned tables limited to 10 covers. Seating list will be available.

 Please print.

I will donate _____ for the raffle/door prizes.

Item(s) will be sent to : Office of the Société (vouchers/checks only) De Bragga & Spitler, Inc.

Payments accepted: check / money order / cash

