

ST. CLARE FRATERNITY

Dorothy M. Palzinski, SFO.
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503-652-5521

January 31, 2007

Dear Brothers and Sisters in Christ,

St. Clare Fraternity invites you to join in our Secular Franciscan Retreat. All are welcome, you do not have to be a Secular Franciscan to attend. We can assure you that it will be a time to put all other concerns and worldly worries aside, a time to completely relax, and a time to allow ourselves to grow spiritually in the Lord's company.

DATE: MAY 18-20, 2007
PLACE: OUR LADY OF PEACE RETREAT CENTER
3600 SW 170 AVE. - BEAVERTON, OREGON
RETREAT DIRECTOR: FR. EMERY TANG, OFM.
RETREAT COST: \$135.00

We are extremely fortunate to have Fr. Emery Tang, OFM. as our Retreat Director this year. Fr. Emery Tang, is a Chinese-American whose career has included serving as a secondary school teacher and administrator, a T.V. associate producer, a preacher and spiritual retreat director.

We had a marvelous representation of Secular Franciscans last year - let's all try to come together again as family and share our prayers, love and franciscan family ties again.

You may make duplicate copies of this notice and the Registration Forms as needed. To sign up for this retreat please fill out the Registration Form, along with your deposit and mail same to:

**Dorothy Palzinski, SFO.
8603 SE. Causey Ave. #211
Happy Valley, Or. 972086**

After we receive your Registration Form, a confirmation letter or e-mail notice acknowledging same will be sent to you. A map and directions will also be enclosed if requested.

Love, peace, joy,

Dorothy M. Palzinski, SFO

Note: Sign in time for the retreat is anytime after 3:00 p.m.. Retreat officially begins with dinner at 7:00 p.m.

RETREAT - MAY 18-20, 2007
OUR LADY OF PEACE RETREAT CENTER
3600 SW. 170TH AVE.
BEAVERTON, OR. 97006
503-649-7127
RETREAT REGISTRAION

NAME _____

ADDRESS _____
(street) (city - State - zip)

<e-mail address> _____ (This will enable us to send confirmation via e-mail)

PHONE _____

FRATERNITY _____

Name of your Parish if you are NOT a Secular Franciscan _____

WEEKEND RETREAT TOTAL COST \$135.00 (this includes room, board and Friar's stipend)

**** REGISTRATION FEE OF \$68.00 IS TO BE INCLUDED WITH THIS REGISTRATION**
PLEASE MAKE CHECKS PAYABLE TO **ST. CLARE FRATERNITY**

_____ I have enclosed \$68.00 registration fee, and will pay the \$67.00 balance when I check in and received my room assignment.

_____ I have enclosed \$135.00, full payment for the retreat.

DO YOU HAVE ANY DISABILITY THAT NEEDS SPECIAL CONSIDERATION?

_____ YES _____ NO

IF YES, PLEASE STATE THE PROBLEM

SEND REGISTRATION TO: **DOROTHY PALZINSKI, SFO.**
8603 SE. CAUSEY AVE. #211
HAPPY VALLEY, OR. 97086
PHONE - 503-652-5521
e-mail <dpalz@europa.com>

If you would like to participate in the liturgy, please check below:

I WOULD LIKE TO HELP WITH:

_____ Liturgy of the Hours _____ Reader _____ Eucharistic Minister

NOTE: You may check in any time after 3:00 p.m. Retreat officially starts with dinner at 7:00 p.m.

_____ I do not need a map. _____ Send a map with directions. to the Retreat Center.