

# Sixteenth Annual Sweetheart Dance



Friday, May 2, 2008  
Alpine Country Club



1 Alpine Way  
Cranston, RI

*Each girl may be accompanied by her father or a significant person in her life.*

*Tickets Pricing: \$23.00 per Adults and \$17.00 per Child*

*All tickets will be sent home with the families' oldest daughter prior to the event.  
(Please note there will be no tickets sold at the door)*

*Deadline to purchase tickets will be Monday, April 21<sup>st</sup>*

*Pictures starting at 5:45pm  
Dinner is at 6:30pm SHARP!*

*The events official photographer will be Gene Hutnak.  
Picture envelopes will be sent home and MUST be brought to the event with payment and package choices.*

## Events Menu

*Tossed salad with Italian Dressing*

*Penne Marinara (Family Style)*

**Adults:** *Chicken Françoise, Green Beans & Garlic Mashed Potatoes*

**Children:** *Chicken Fingers, Smiley Fries and Honey Glazed Carrots  
OR*

*Breaded Chicken Cutlets, Smiley Fries and Honey Glazed Carrots*

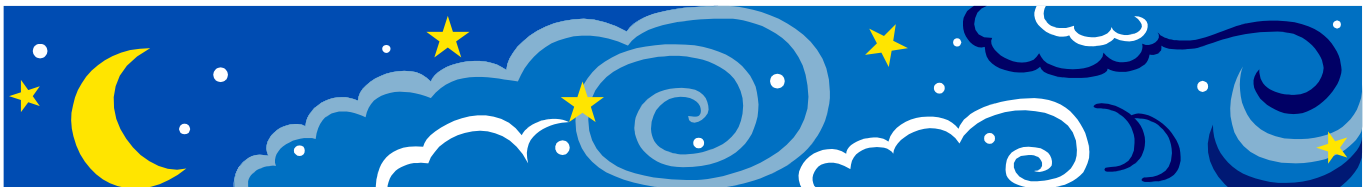
*Warm Dinner Rolls with Butter Rosettes*

**Dessert:** *Vanilla Ice Cream with Chocolate & Strawberry Sauces*

**NOTE:** *This is a St. Rocco School event and therefore no alcohol will be served. Smoking is not permitted.*

*If you have any questions, contact Carlene Tiberi at 578-1377*

*Your Sweet Heart Dance Committee wishes the girls a night filled with shining memories...*



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**Response Card:** Please fill out and return to school by **Monday, April 21, 2008**

Adult Name: \_\_\_\_\_

Child Name: \_\_\_\_\_

Grade: \_\_\_\_\_ A or B

Child Name: \_\_\_\_\_

Grade: \_\_\_\_\_ A or B

Child Name: \_\_\_\_\_

Grade: \_\_\_\_\_ A or B

Child Name: \_\_\_\_\_

Grade: \_\_\_\_\_ A or B

*Please indicate menu selection:*

*Adult: Chicken Françoise, Green Beans & Garlic Mashed Potatoes*  
*Girls are welcome to purchase adult orders...*

*Adult: \_\_\_\_\_ @ \$23.00*

*Child: Chicken Fingers, Smiley Fries and Honey Glazed Carrots*

*Child: \_\_\_\_\_ @ \$17.00*

*Breaded Chicken Cutlets, Smiley Fries and Honey Glazed Carrots*

*Child: \_\_\_\_\_ @ \$17.00*

Total enclosed: \_\_\_\_\_

## **Checks made payable to St. Rocco School**

*Please make note of any medical dietary needs: \_\_\_\_\_*

Tables of **10** can be reserved. It is important that when making your seating request to insure that all families involved communicate the same request.

*We will do our best to accommodate your requests!*

**Please reserve me a table for the following families:** \_\_\_\_\_,

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, and \_\_\_\_\_.

My contact Phone #: \_\_\_\_\_

**We will not be able to attend:** \_\_\_\_\_

