



Indiana Sons of the American Revolution

Dinner with Compatriots and Guests Registration

Friday, October 13, 2023

6:30 p.m.

Procopio's Pizza and Pasta

127 N 2nd Street, Vincennes, IN 47591

Dinner is Dutch treat.

Compatriot Name: _____

Guest Name(s): _____

Hotel Reservations

If you wish to make overnight reservations, there are numerous motels to choose from, for example: Towneplace Suites Vincennes Marriott, phone 812-255-1500; Holiday Inn Express, 812-886-6333; Comfort Suites Vincennes, 812-882-2244.

Patriot Grave Marking Registration
Conducted by the George Rogers Clark Chapter
Saturday, October 14, 2023 at 10:00 a.m. EDT
Greenlawn Cemetery
919 Willow Street
Vincennes, IN 47591

Name of Color Guard Participant: _____

SAR Title (office) of Color Guard Participant: _____

Organization (SAR, CAR) and State of Color Guard Participant: _____

The Color Guard musters at 9:00 a.m.

Name of Wreath Presenter: _____

Title (office) of Wreath Presenter: _____

Chapter of Wreath Presenter: _____

Organization (SAR, DAR, CAR) and State of Wreath Presenter: _____

Email address: _____ Phone: _____

Wreath presenters are not required to wear colonial attire and they supply their own wreath and stand.

If you are not participating in this grave marking ceremony in another capacity, you may receive credit toward your SAR Patriot Grave Marking Medal by contributing \$60 to help fund this ceremony. (Color Guard service does not count toward this medal.) If you wish to help in this manner, please provide your name, title (office), and SAR chapter name.

Please make your \$60 check payable to the George Rogers Clark Chapter SAR.
Mail to Robert P. Cunningham, 3831 S. Laura Way, Bloomington, IN 47401-8827.

Fall House of Delegates Meeting Registration

Hosted by the George Rogers Clark Chapter

Saturday, October 14, 2023

St. Francis Xavier Parish Center

106 S 3rd Street, Vincennes, IN 47591

Registration at 11:30 a.m., Meeting at 12:30 p.m.

Compatriot Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____ Phone: _____

Chapter: _____

Guest Name(s): _____

	Member	# of Guests	Total Attending	Price	Total Due
Lunch:	_____	_____	_____	<u>\$30.00</u>	\$ _____

Boxed lunch will include a sandwich, fruit, carrot cake and a drink.

Please select ONE sandwich per attendee:

_____ Ham Club _____ Turkey & Cheddar

_____ I do not wish to order lunch.

**Please complete and mail this form with payment by
Thursday, October 5.**

Checks payable to George Rogers Clark Chapter SAR

Mail to: Robert P. Cunningham
3831 S Laura Way
Bloomington, IN 47401-8827

Questions:
Email: rpcunnin@indiana.edu
Phone: 812-336-7131