



First Annual
SLEEP OUT
4 Homelessness
FUNDRAISER

Join us in this nationwide
movement because
everyone should have a Home!

Columbus Holiday Weekend

Fri. Oct. 6 through Sun. Oct. 8

Who can participate?

by Yourself, with Family/Friends, Colleagues,
Community Group, Church...

How does it work?

Pick the evening, start, and finish times during the week-
end, and location (backyard, campground, parking lot,
church property, etc.).
Tent or under the stars!

Raise funds

To donate to Friends of St. Luke's, Inc.
by getting sponsors, hosting a bake sale, car wash,
yard sale, etc.

Registration forms available on St. Luke's Guesthouse
Facebook page and website or by scanning the QR Code.

For more information,
please contact Marie Smoker at stlukesguesthousemaries@gmail.com or mail St. Luke's Guesthouse, 141 Main
Street, Southbridge, MA 01550

Ask me why
I am giving up
my bed
for a night.



Registration form or
check our website at
stlukesguesthouse.wordpress.com



**First Annual “Sleep Out” Fundraiser
“A Night Without a Home”
Columbus Holiday Weekend: October 6, 7, and 8, 2023**

Registration Form

By completing and returning this registration form you are pledging to:

- Give up your bed for one night & “Sleep Out”
- Raise funds for Friends of St. Luke’s, Inc.

**Suggested minimum donation per registration form irrespective of how many people participate is \$100.
Please send donations by October 24, 2023.**

We require that you obtain all the proper permission to “sleep out” at the location of your choice.

Contact Name: _____

Email Address: _____ Phone Number: _____

Mailing Address: _____

Indicate if registering as: an individual/family [] Group [] Organization [] Business []

Please provide the name of your group: _____

Mailing address if different from contact above: _____

Number of participants taking part: _____ Age range (optional): _____

Date of Your “Sleep Out”: Friday Oct. 6th [] Saturday Oct. 7th [] Sunday Oct. 8th []

Location of your “Sleep Out” event: Backyard [] Campground [] Organization/Business []

Other _____

Permission Granted: YES [] NO []

Please make your check payable to Friends of St. Luke’s, Inc. with “Sleep Out” on the memo line.

Please mail completed registration form and check payable to Friends of St. Luke’s, Inc. to:
St. Luke’s Guesthouse, 141 Main St., Southbridge, MA 01550 Attention: Marie Smoker. Director

Please add me to the St Luke’s Guesthouse mailing list []

Please make a copy of this form for your records.



DONATION FORM

**First Annual "Sleep Out" Fundraiser
"A Night Without a Home"
Columbus Holiday Weekend: October 6-8, 2023**

Yes! We want to support your fundraiser and contribute to the fight against homelessness!

ORGANIZATION:						
ADDRESS:						
CITY/TOWN:		STATE:		ZIP:		
CONTACT INFORMATION:						
LAST NAME:		FIRST NAME:				
TITLE/POSITION:						
TELEPHONE:			EXT.			
EMAIL ADDRESS:						
DONATION AMOUNT:	\$					

Enclosed is a check for the amount above made out to Friends of St. Luke's

All donations are tax-deductible and a thank you acknowledgement letter with our tax identification number will be mailed upon receipt.

We would like to become sustaining supporters of Friends of St. Luke's by making a recurring monthly donation. Please contact me to set up.

Please send me the St. Luke's Guesthouse quarterly newsletter.

Please contact me so I can find out more about supporting Friends of St. Luke's, Inc

Please complete and mail this registration form to:

St. Luke's Guesthouse - 141 Main Street, Southbridge, MA 01550 - Attn: Marie Smoker