



**COPTIC MONASTERY OF ST. SHENOUDA  
ROCHESTER-NEW YORK**

**Retreat Permission Letter**

Name: \_\_\_\_\_  
Church: \_\_\_\_\_ City, State: \_\_\_\_\_  
Visit Dates: from \_\_\_\_\_ to \_\_\_\_\_  
Church Priest: \_\_\_\_\_  
Letter: \_\_\_\_\_

\_\_\_\_\_  
(Priest's signature)

\_\_\_\_\_  
(Date)