

Holy Mass Intention Request Form

Name of Person Requesting the Mass



Phone Number

Email (optional)

Name(s) of Person(s) to be Remembered

Preferred Date(s) for the Mass (if any)

Specific Date _____

First available date is fine

Preferred Mass Time (if any)

Saturday Vigil

Sunday

Weekday

No preference

Offered by (name to appear in the bulletin, if desired) Please list as "Anonymous"

Offering Enclosed \$ _____

Method of Payment – To be submitted with this request form

Cash Cheque

NOTE: For e-transfer offerings, please complete the online form.

Additional Notes (optional)

Please return this form with the offering to: 1) the offertory basket or in person during office hours (cash or cheque), or 2) by mail or to the *Mass Intentions mailbox* in the vestry foyer (cheque only).

Thank you for allowing us to join you in prayer through the celebration of the Mass.

St. Luke's Parish Downeyville
340 St. Luke's Road, Lindsay, ON K9V 4R4