



Request #

St Patrick Mass Intention Request

Please Print Clearly

Suggested Mass Offering is \$10 per mass request

DATE: _____

Additional Lines On Back

The Mass Intention

Is For:

☐ Unknown ☐ Living ☐ Deceased ☐ Mass Card Requested

Use the back of this sheet for additional names, Special Intentions or an address to have the Mass Card sent to

*The Mass is
requested by:*

*Preferred Mass date
and time:*

Please note Preferred date is subject to availability. Masses are scheduled in the order they are received. Please list a source of contact so that the Mass can be confirmed when scheduled. Masses may be paid by cash, check, or online. Please place this Mass request in the Offertory. If a Mass card is needed - Contact the church office Monday - Friday 9 a.m. to 2:30 p.m. to pick up a Mass Card

*Contact
Information:*

Phone Number

Email Address

Office use below this line

Request received by:

☐

Email

☐

Offertory

☐

Postal

☐

Phone

☐

In Person

☐

Found on OSV

*Scheduled Mass
date and time:*

*Payment
Received*

☐

Cash

☐

Check Number

☐

Online Confirmation Number :

☐

Includes \$3 online offset fee

☐

Mass Book Entry

☐

Priest Book Entry

☐

Mass Report Entry

Scheduled
By

Please note Preferred date is subject to availability. Masses are scheduled in the order they are received

Mass Requested For	Deceased / Living	Requested Date

Address to send Mass Card to if not picked up from the office

Name: _____
 Street _____
 City: _____
 State: _____ Zip: _____

Notes / Special Intentions