CATHOLIC FAITH COMMUNITIES OF SAINT THERESA AND SAINT CHRISTOPHER

2025 MASS INTENTION REQUEST FORM





		Person Rec	questing M	ass Intentio	<u>n</u>	
Name:				Phone	e #:	
	(First)		(Last)			
Address:				City:		· · · · · · · · · · · · · · · · · · ·
State:	Zip:	E	mail:			
	you are registered:					
		Mass In	itention Requ	uest Policy		
no more than during the we	sistent and fair oppo 5 (five) weekend Meek: Monday-Wedne 4 4pm and Sundays 8	asses per year fr sday 8am at St.	om each don Theresa and	or for an inten Thursdays 8an	tion. Mass intention at St. Christophe	ons are available er. Weekend Masses
congregation,	r also offers an inten that Father Dufour on intention of this	celebrates when	he does not l	nave a public I	Mass any particula	ır day.
volume of rec	ome to request a spe quests we receive, we commodated on Hol	e can not guaran	itee that a Ma	ss will be offe	ered on a specific of	date. Requests
with the prim	s will be granted as cary request, the next will be given the first	closest date and	l time will be	scheduled. If	you do not specify	y a date and
Office. Reque	processed on a first- ests are processed on eks for your request to hail.	Mondays, Tues	sdays and We	dnesdays fron	n 8:30am-12noon.	Please allow at
	oreseen circumstanc able opening.	es a Mass cance	llation occur	s, the intention	for the Mass will	be rescheduled on
	ing per Mass: \$10.00 request is made.) per weekday, \$	325.00 per we	eekend, Please	make checks pay	able to the church
			or Office Use	<u>Only</u>		
Received:	Entered:	Donation	: \$	Check #:	Notice Ser	nt:

Please print all information clearly

	Person	/ Intention fo	r which Mass is to be	<u>offered</u>	
Name:					
Circle ALL that apply:				Birthday	
Mass requested by:					
Date Preferred:		Time	e Preferred:		
Church Preferred:			_		
	Person	/ Intention fo	r which Mass is to be	<u>offered</u>	
Name:					
Circle ALL that apply:				Birthday	
Mass requested by:					
Date Preferred:					
Church Preferred:			_		
	Person	/ Intention fo	r which Mass is to be	<u>offered</u>	
Name:					
Circle ALL that apply:			Anniversary	Birthday	
Mass requested by:					
Date Preferred:					
Church Preferred:			_		
	Person	/ Intention fo	r which Mass is to be	<u>offered</u>	
Name:					
		Living		Birthday	
Mass requested by:					
Date Preferred:					
Church Preferred:					
			r which Mass is to be	<u>offered</u>	
Name:					
Circle ALL that apply:	Deceased	Living	Anniversary	Birthday	
Mass requested by:					
Date Preferred:					
Church Preferred:					