

AMDG

Remembrance Masses / Special Intentions

Please write clearly below your request and hand either directly to the Parish Priest or add to any of the Mass Collector baskets

Request from: _____

Mass for: _____

Preferred Mass Date and Time (if applicable)*: _____

Donation**: _____

*Whilst every effort will be given to say the requested Mass on the Preferred Date, in certain instances this may not be possible. In such cases, an available date nearest to the Preferred Date will be designated.

**If you are a Tax Payer, your donation will be eligible for Gift Aid. Please use the envelopes at the back of the Church and write your name and address on the Gift Aid envelopes.

Thank you

For office use only:	
Intention passed on to Parish Newsletter	Date:
Mass said	Date:
Donation/Gift aid accounted	Date:

LDS