## Mary Queen Catholic Church Request for Mass Intentions

| Requestor's Name:   |   | Phone Number:   |  |                          |   |
|---|---|---|--|--------------------------|---|
| request throughout t<br>for the year, you will<br>schedule up to thre<br>Please make a copy<br>there is a conflict wit<br>made by cash or che<br>For Unscheduled Ma | he year, will be on not be able to see Mass Intention of this completed the one or more oeck. Checks shows sees, there is n | counted toward chedule anymoons for a particle form prior to f your dates reculd be made out o limit on how recounts. | s these 12. Once you re for the year. Also, cular Saturday/Sund turning it in to the offiquested. Payment for it to Mary Queen Cat | st. These are not listed | lass Intentions  be able to year. contacted if ay either be |
|   |   | Scheduled   |  | Unscheduled              |   |
| Preferred Date  | Alternate<br>Date   | Mass<br>Time  | Name   | Living                   | Deceased  |
| 1   |   |   |  |                          |   |
| 2   |   |   |  |                          |   |
| 3   |   |   |  |                          |   |
| 4   |   |   |  |                          |   |
| 5   |   |   |  |                          |   |
| 6   | ,   |   |  |                          |   |
| 7   |   |   |  |                          |   |
| 8   |   |   |  |                          |   |
| 9   |   |   |  |                          |   |
| 10  |   |   |  |                          |   |
| 11  |   |   |  |                          |   |
| 12  |   |   |  |                          | , and   |
| Recorded On:  |   | _ Amount Pai  | d: Cash  | : Check No:              |   |