

**St. Mary Parish
Mass Intention Request Form**

Mass is being requested for: _____

deceased get well birthday anniversary thanksgiving special intention

Number of Masses requested: _____

Would you like the first available Mass or a specific date/time:

First Available: any daily (Mon-Sat) 8am Sat Vigil Sun 8am

Sun 9:30am Sun 11am Sun 5pm

Specific date and time*: _____

*We will do our best to accommodate your requested date, but if it is already full, are you ok with the next closest date? Yes No

Send card: Yes No Requestor will pick up and send

If yes, name and address of person receiving card:

Name: _____

Mailing Address: _____

City/State/Zip: _____

Mass is being requested by: _____

Address: _____

City/State/Zip: _____

Phone #: _____

Suggested Donation is \$10 per Mass.

Please turn this form and donation into the Parish Office, or mail to:

St. Mary Parish
Attn: Mass Intentions
1333 58th Street
Sacramento, CA 95819

FOR OFFICE USE ONLY

Date/Time Mass is being celebrated: _____

Payment Received Receipt written Date payment received: _____

Recorded in Daily Mass Record Book Card sent Person receiving request: _____