

Please fill out the information if you would like to have Mass offered for special or personal intention and send request to:

The Society for the Propagation of Faith

2219 Kennedy Road, Toronto, Ontario, M1T 3G5
Fax: 416-699-9019 or Email: mission@missionsocieties.ca

REQUESTOR INFORMATION (please print)					
First Name:		Last Name:			
Address:			Apt. No	o.:	
City:	Province:		Postal C	Postal Code:	
SINGLE MASS – Stipend (\$10)					
Mass Intention:					
NOVENA MASSES – Stipend (3 or 9 days x \$10)					
Mass Intention:					
GREGORIAN MASSES – Stipend (\$300)					
For the repose of the soul of:					
Date of Death:					
PLEASE SEND MASS CARD TO (please print)		No Yes, to:	Requestor	Contact Below	
First Name:		Last Name:			
Address:				Apt. No.:	
City:		Province:			
Postal Code:		Country:			