

TIME:

2021

St. Joseph the Worker Church  
19808 Cantlay Street  
Winnetka, California 91306  
818 341-6634

Mass Intention Request  
Suggested offering \$10.00 per Mass

( PLEASE PRINT IN PENCIL USING CAPITAL LETTERS )

YOUR NAME \_\_\_\_\_

Phone #: \_\_\_\_\_ Today's Date: \_\_\_\_\_

(1)Name: \_\_\_\_\_

Circle: Intention Birthday Anniversary Get Well RIP

Date requested: \_\_\_\_\_ Mass Time \_\_\_\_\_

(2)Name: \_\_\_\_\_

Circle: Intention Birthday Anniversary Get Well RIP

Date requested: \_\_\_\_\_ Mass Time \_\_\_\_\_

(3)Name: \_\_\_\_\_

Circle: Intention Birthday Anniversary Get Well RIP

Date requested: \_\_\_\_\_ Mass Time \_\_\_\_\_

(4)Name \_\_\_\_\_

Circle: Intention Birthday Anniversary Get Well RIP

Date requested; \_\_\_\_\_ Mass Time: \_\_\_\_\_

**OFFICE USE ONLY:**

Accepted by: \_\_\_\_\_ Date entered \_\_\_\_\_

Total \$ \_\_\_\_\_ Cash \_\_\_\_\_ Check \_\_\_\_\_ date received \_\_\_\_\_

Card(s) requested: No \_\_\_\_\_ Yes \_\_\_\_\_ How many \_\_\_\_\_