

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@missionsocieites.ca

REQUESTOR INFORMATION (please print)				
First Name:		Last Name:		
Address:	1		Apt. No.:	
City:	Province:		Postal Code:	
SINGLE MASS – Stipend (\$10) Please note that mass stipends are not tax deductible.				
Mass Intention:				

NOVENA MASSES – Stipend (3 or 9 days x \$10)	Please note that mass stipends are not tax deductible.
Massinten	
Mass Intention:	

GREGORIAN MASSES – Stipend (\$300)	Please note that mass stipends are not tax deductible.
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:	