

Mass Intentions Requests

Requestor's Name(s): _____

Requestor's phone #: _____

Requestor's e-mail: _____

Mass Intention for: _____ (Living / Deceased)

*Please note there is only *one intention* per Mass, examples:

Jane Smith (Living), John Perez (Deceased), or Mike and Jenna Rodriguez (Deceased)

Preferred Date for Mass Intention: _____

Preferred Time for Mass Intention: _____

*If your preference is not available we will contact you regarding the next available date.

If you would like a card forwarded to someone on your behalf please let us know:

Their Name(s): _____

Mailing Address: _____

A \$10 dollar donation is suggested for each Mass intention requested.

Please include on your check in the Memo Line: Mass Intention Request.

Please mail donations and the above information to:

St. Bernadette Catholic Church
Parish Office
7600 Old Keene Mill Rd
Springfield, VA 22152

Donations along with the above information can also be dropped off
at the Parish through the mail slot in the Parish Office door.