Church of the Assumption, Walkinstown Parish

REQUEST FOR MASS INTENTION

Name of Person requesting Mass							
Contact Telephone Number							
	f Person(s) Intention						
MASS INTENTION		Month's Mind		Anniversary	Other:		
DATE RE	QUIRED						
Monday t):00 a.m.*		Saturday Vigil 6:00 p.m.		Sunday 11:30 a.m.		
*Please note that if a Funeral Mass occurs Monday to Saturday (10:00 a.m.) on the date required, the mass intention will be moved to the next day or weekend. We will contact you to advise if there is such a change.							
	Stipend for Mass		€10	Or €			
				(Insert Value)			
For compl	etion by Offi	ce Staff:					
Stipend Value for Mass received							
Details taken by				Date		Entered in Diary	