

Mass Intention Request Form

Complete the information below and return (along with your desired stipend) to the church office at Resurrection Church or mail to 4110 Cannon Rd., Grand Island, NE 68803. Form and stipend can also be dropped in collection basket, or in the plastic secure box by the office door. **Please make checks payable to Resurrection Church. A suggested stipend is \$10.00 for one mass.**

Thank you!

Please print legibly.

Today's Date: _____

This Mass will be offered for: _____

Is this person living or deceased? Living Deceased

This Mass is being offered by: _____

Stipend: \$ _____

How many masses do you want offered with this stipend? _____

Desired Date for Mass: _____

Contact Number (in case we have questions): _____

For Office Use Only ____ Recorded in register	For Office use only Mass was offered on ____ / ____ / ____ ____ Updated register with Mass date
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