3636 State Highway 5, PO Box 627, Fonda, NY 12068-0627

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A Sacred Place of Peace and Healing • A Site of History and Holiness

## REQUEST MASS INTENTIONS THE SAINT KATERI TEKAKWITHA SHRINE

(The usual offering of \$10.00 for each Mass and \$20.00 for a specific date)

Tod	day's Date:
Dear friars,	
Enclosed please find the amount of \$ as an offering for (enter number) at Saint Kateri Shrine.	Mass(es) to be said
I would like the Mass for:(Name of Person or Intention)	
The person is (circle one): Repose of the Soul - Healing of - Intentions of	
My name and address is:	
I would like you to send a notice of this gift of a Mass to:	
***OFFICE USE ONLY***	
Date Mass Said:	
Date Payment Received:	
Payment Type:	
CASH (amount received): CHECK (amount and check no.):	<del></del>
CREDIT CARD	
Card number	
Expiration date	
OVA	