

**Christ the King Parish  
Mass Request Form**

Return this form to the parish office along with the \$10 stipend (checks made out to "Christ the King Parish") for each Mass.

Masses are scheduled on a first-come, first-served basis. If your first or second choice of date and time is not available, you will be given the closest day.

Due to the large number of initial requests for 2022, you may only ask for three Masses, two on a weekday and one on a weekend.

Your Name \_\_\_\_\_

Telephone \_\_\_\_\_

Church Requested \_\_\_\_\_

**FIRST MASS INTENTION**

Name \_\_\_\_\_ Deceased? (Y /N)

Requested by \_\_\_\_\_

**Date and Time of Mass**

1<sup>ST</sup> Choice \_\_\_\_\_

2<sup>ND</sup> Choice \_\_\_\_\_

**SECOND MASS INTENTION**

Name \_\_\_\_\_ Deceased? (Y /N)

Requested by \_\_\_\_\_

**Date and Time of Mass**

1<sup>ST</sup> Choice \_\_\_\_\_

2<sup>ND</sup> Choice \_\_\_\_\_

**THIRD MASS INTENTION**

Name \_\_\_\_\_ Deceased? (Y /N)

Requested by \_\_\_\_\_

**Date and Time of Mass**

1<sup>ST</sup> Choice \_\_\_\_\_

2<sup>ND</sup> Choice \_\_\_\_\_

\*\*\*\*\* Parish Office Use Only \*\*\*\*\*

# \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date \_\_\_\_\_

**Christ the King Parish  
Tabernacle Candle Request Form**

Requests will be accepted on a first-come, first-served basis. If the date you request is not available we will schedule it for the closest week.

Payment of \$20.00 MUST BE SUBMITTED with this form.

Please make check payable to "Christ the King Parish". Please use separate checks for Mass requests and Tabernacle Candle requests.

Your Name \_\_\_\_\_

Your Address \_\_\_\_\_

Telephone \_\_\_\_\_

**FIRST CANDLE REQUEST**

Tabernacle Candle offered for:

Name \_\_\_\_\_ Deceased? (Y /N)

Requested by \_\_\_\_\_

**Offered for the week of (Sunday-Saturday):**

1<sup>ST</sup> Choice week \_\_\_\_\_

2<sup>ND</sup> Choice week \_\_\_\_\_

Church Requested \_\_\_\_\_

**SECOND CANDLE REQUEST**

Tabernacle Candle offered for:

Name \_\_\_\_\_ Deceased? (Y /N)

Requested by \_\_\_\_\_

**Offered for the week of (Sunday-Saturday):**

1<sup>ST</sup> Choice week \_\_\_\_\_

2<sup>ND</sup> Choice week \_\_\_\_\_

Church Requested \_\_\_\_\_

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*Parish Office Use Only*

# \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date \_\_\_\_\_