

Mass Intention Request

(Please Print Clearly)

Your Name: _____ Date: _____

Contact Phone Number: _____

Mass Intention For: _____

_____ Living _____ Deceased _____ Both

Number of Masses (*maximum of 5 intentions per household/year): _____

Requested Dates (if any): _____

Select One (required):

_____ May be celebrated at any Calmar Area Pastorate church/nursing home.

_____ May be celebrated at _____ Church.

Optional: I give permission to schedule this Mass intention as a collective Mass intention. _____ (initial) (Collective Mass: uniting multiple, separate, paid Mass intentions into a single Mass. This will not be a common practice.)

Please return this form to any of our parish offices or mail to the address below. The customary offering in the Archdiocese of Dubuque is \$10.00/Mass. Cash or checks are accepted (Please make checks payable to “Calmar Pastorate Mass Stipends.”)

Once a Mass intention is received, we will do our best to schedule it on the requested date; however, availability cannot be guaranteed.

You may request a Mass for any deceased person or persons, whether Catholic or not. If requesting a Mass for a living individual, you must obtain their permission for the publication of their name. By submitting this form, you confirm that you have received their explicit consent.

*To ensure we are able to celebrate all Mass intentions within one year, we respectfully ask that each household limit their requests to a maximum of five intentions per year. If you have questions, please contact Kristi Creek at 563-562-3045 or k.creek@dbqarch.org. Mail request form to Kristi at PO Box 819, Calmar, IA 52132.

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