

MAGDALEN COLLEGE OF THE LIBERAL ARTS

Mass Request Form

Intention for:

Living: _____ Deceased: _____ (All Mass intentions are announced.)

Do you prefer a specific date? _____

(If the specific date you request is not available, the nearest open date will be scheduled.)

Requested By:

Card: _____ yes _____ no

If yes, please provide mailing address:

Amount of stipend enclosed: _____ (customary stipend is \$10.00)