



Guardian Angels Roman Catholic Church
 10630 Creditview Road, Brampton, Ontario, L7A 0T4
 Tel. 905.970.9175

Parish Ref. Code: FORM-Mass Request	Rev. 5.0
Last Reviewed: 08 January 2024	

MASS REQUEST FORM

FIRST NAME of Person the Mass is being offered for

LAST NAME of Person the Mass is being offered for

MASS INTENTION (Check ONE INTENTION ONLY per offering): Thanksgiving Deceased Special Intention
DATE OF MASS INTENTION **Mon / Tue / Wed / Thu / Fri:** 7:30 AM | **1st Friday only:** 7:30 PM
Sat: 5 PM | **Sun:** 9 AM 10:30 AM 12 PM | **Lent & Advent only:** 7:00 PM

Please submit by email or in-person at least two (2) business days before the intended date of the Mass.

Parish Office Business Hours: Monday to Friday, 9 a.m. to 4 p.m. Closed on weekends, holidays & Easter Monday

REQUESTED BY: Enter your Full Name

Today's Date: _____ **Phone #:** _____

Mass Offering: \$20 Other \$_____

Note: For offering of less than \$20, your Mass intentions will be **unannounced**.

For Parish Office Use	Mass offering received by: _____ Date: _____
	Recorded by: _____ Date: _____
NOTES:	