



LEGIONARIES OF CHRIST

Mass Request Offerings

Type of Mass Offering	Quantity		Suggested Offering		Sub Total
Individual Mass		X	\$ 10	=	\$
Novena of Masses		X	\$ 90	=	\$
Perpetual Enrollment		X	\$ 100	=	\$
Walking with Christ Series		X	\$ 150	=	\$
Life in Christ Series		X	\$ 300	=	\$
Gregorian Series		X	\$ 300	=	\$

Total \$

The Mass(es) is/are being offered for (Name) _____
 The intention(s) is/are _____
 (List on the back of this form, any additional intentions.)

The Mass(es) are being requested by

Your Name _____
 Address _____
 City _____ State _____ Zip _____
 Phone (____) _____ Email _____

Please make checks payable to **Legionaries of Christ**. (Do not send cash)

Please return this form with your donation to:

Legionaries of Christ
 Attention: LC Mass Request
 30 Mansell Court, Suite 103
 Roswell, GA 30076

Have questions? Contact us at **(470) 682-3906** or by email at **contact@lcmassrequest.org**