



2023 Mass Book Opening

Immaculate Heart of Mary is opening the 2023 Mass Book! Please fill out the attached form and drop it off with a **\$10 (per mass)** donation in the black mailbox in front of the Nazareth Center, or mail it to:

Immaculate Heart of Mary Church
1571 S. Martine Avenue. Scotch Plains NJ 07076

Please be patient with us. We will process the masses in order of receipt, and we will do our best to fulfill your requests. We will call you with any questions and to confirm your order. There will be a limit of 4 masses per person. Please indicate if you need an actual card, we will arrange for you to pick up the cards in front of the Nazareth Center.

Our mass schedule is as follows:

Saturday (Anticipated): 5pm

Sunday: 8am, 10am, 12noon

Weekdays & Saturdays: 7am and 8:30am

You may also purchase a **Sanctuary Candle** or **Altar Bread & Wine** for the entire week at a cost of **\$20**. The order form for those intensions is on the back of this paper.

Mass Intention Offering



Mass for: _____

Living

Deceased

Date Requested: _____ Time: _____

Requested by: _____

Phone Number: _____ E-Mail: _____

Card Needed? Yes No Donation \$10 Cash Check _____

For internal use only: Paid Y | N - Amount Received: _____ Received by: _____ Date Received _____

Mass Intention Offering



Mass for: _____

Living

Deceased

Date Requested: _____ Time: _____

Requested by: _____

Phone Number: _____ E-Mail: _____

Card Needed? Yes No Donation \$10 Cash Check _____

For internal use only: Paid Y | N - Amount Received: _____ Received by: _____ Date Received _____



Mass Intention Offering

Mass for: _____

Living

Deceased

Date Requested: _____ Time: _____

Requested by: _____

Phone Number: _____ E-Mail: _____

Card Needed? Yes No

Donation \$10 Cash Check _____

For internal use only: Paid Y | N - Amount Received: _____ Received by: _____ Date Received _____



Mass Intention Offering

Mass for: _____

Living

Deceased

Date Requested: _____ Time: _____

Requested by: _____

Phone Number: _____ E-Mail: _____

Card Needed? Yes No

Donation \$10 Cash Check _____

For internal use only: Paid Y | N - Amount Received: _____ Received by: _____ Date Received _____



Sanctuary Light Intention

The Candle will burn for: _____

Living

Deceased

Week Requested: _____

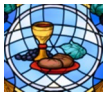
Requested by: _____

Phone Number: _____ E-Mail: _____

Card Needed? Yes No

Donation \$20 Cash Check _____

For internal use only: Paid Y | N - Amount Received: _____ Received by: _____ Date Received _____



Altar Bread & Wine Intention

The Bread & Wine is donated to: _____

Living

Deceased

Week Requested: _____

Requested by: _____

Phone Number: _____ E-Mail: _____

Card Needed? Yes No

Donation \$20 Cash Check _____

For internal use only: Paid Y | N - Amount Received: _____ Received by: _____ Date Received _____