



MOST HOLY TRINITY PARISH

212 Route 390 • Cresco, PA 18326

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Mass Intention Request Form

(Please Print Clearly – illegible writing may result in misspellings)

Mass intention for: _____ Living Deceased

Date preference: _____ **If desired date is already scheduled, the next closest date will be selected.*

Name of Person(s) or Group requesting Mass: _____

Address: _____

Email: _____

Phone Number: _____

Suggested Donation: \$10.00 for Regular Mass; \$20.00 for Padded Mass Card

Regular Memorial

If a Mass card should be sent to a family, please furnish the name(s) and address:

If you would like to have the Mass listed in the bulletin, please submit your request at least two weeks prior to the requested date.

Official Office Use

Revised: June 2022