



Seton  
Catholic  
School



# Mass Offering Reservation Form

*Please Print*

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kindly requests to have a Mass offered  
in memory of:

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Relationship: \_\_\_\_\_.

Please return reservation form to the Seton  
Catholic School office with your donation of \$10  
or check made payable to *Seton Catholic School*.

Email: \_\_\_\_\_

Student Name & Grade:

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*For office use only.*

Payment: cash \_\_\_\_\_ check # \_\_\_\_\_

Mass date scheduled: \_\_\_\_\_

Mass card sent: \_\_\_\_\_