

# ST. JOHN THE EVANGELIST R.C. CHURCH

*A Pennsylvania Charitable Trust*

50 Jefferson Street, Uniontown, PA 15401

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[www.faysouth.org](http://www.faysouth.org)

## 2025 Milestone Anniversary Mass Request Form

(Policy Revised 10/1/23)

If you and your spouse are celebrating a Milestone Anniversary in 2025, and you would like a Mass offered, please complete the information below.

This Mass does not count against the 1 Mass per household policy.

### Please Check Appropriate Box:

- |  |   |
|--|---|
| <input type="checkbox"/> 25 <sup>th</sup> (Silver) Anniversary | <input type="checkbox"/> 65 <sup>th</sup> Anniversary |
| <input type="checkbox"/> 30 <sup>th</sup> Anniversary          | <input type="checkbox"/> 70 <sup>th</sup> Anniversary |
| <input type="checkbox"/> 40 <sup>th</sup> Anniversary          | <input type="checkbox"/> 75 <sup>th</sup> Anniversary |
| <input type="checkbox"/> 50 <sup>th</sup> (Golden) Anniversary |   |

### Mass Request (Please Print)

\_\_\_\_\_ <sup>th</sup> Anniversary of \_\_\_\_\_

Requested by: \_\_\_\_\_

Date Requested: \_\_\_\_\_ Time Requested: \_\_\_\_\_

Alternate Date/Time: \_\_\_\_\_ Alternate Date/Time: \_\_\_\_\_

### Information below is required:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

E-Mail: \_\_\_\_\_ Phone: \_\_\_\_\_

### For Office Use Only

Date Received: \_\_\_\_\_ Time Received: \_\_\_\_\_ # \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Check: # \_\_\_\_\_ Cash: \_\_\_\_\_

Date Assigned: \_\_\_\_\_ Time: \_\_\_\_\_ Mass Register # \_\_\_\_\_