



SPECIFICATION MASS INTENTIONS

(Specify as much as possible at least one week before desired date)

Name of the petitioner: _____

Telephone: _____

Mass Intention: _____

To be read on the date: _____ Time of the Mass: _____

→ **Below you can specify more Mass Intentions.**

I pay the amount of € _____ (amount per Mass Intention is € 10,-)*:

cash (hand in together with this Specification form)

through Bank Transfer to the bank account number **NL16 INGB 0000 0838 31**
payable to Stichting O.L.Vrouwekerk, Amsterdam.

Please include the Mass Intention and date.

* *cross out the applicable option.*

Hand in:
- to one of the Parish Priests, or
- the mailbox of Centrum De Oude Gracht,
Keizersgracht 218 B, 1016 DZ Amsterdam

You can also communicate your Mass Intentions per email: rector@olvkerk.nl

Mass Intention: _____

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