

ST. GREGORY THE GREAT MASS INTENTIONS 2024

As we continue our Renewal journey, we ask that you be patient with our revised policies. Please note the policies listed below are in line with the Code of Canon Law and Diocesan policies. We work with all who seek Mass intentions to handle requests in a way that is fair, honorable and in keeping with the laws of the Church.

- Canon Law requires the scheduling of one Pro Populo (for the people) on every Holy Day of Obligation (including Sundays). This intention includes all those who live in the boundaries of Parish Family, regardless of their faith tradition. *(No other intention may be scheduled in conjunction with this.)*
- Canon Law prohibits the scheduling of multiple intentions for one Mass. The Diocese of Buffalo does permit two Mass intentions for no more than three Masses in a week (Monday – Sunday). **Between Monday and Sunday there can be a total of 3 Masses offered with two intentions if the intentions are not for the same person/same intention.**
- A maximum of 3 intentions per year for any one individual and from any one person/family may be obtained at this time. **No more than 3 Masses may be offered for “Jane Doe,” and the “Smith family” may not request more than 3 Masses to be offered at St. Greg’s at this time.**

Please mail this entire sheet to our Parish Office

ATTENTION: 2024 Masses

The standard stipend for Masses is \$15 (check made payable to St. Gregory). If you have more than 1 intention, please send a list with ALL the information and one payment. **PLEASE PRINT TO ENSURE ACCURACY.** We will do our best to honor the date requested, but if the date requested is not available, we will move the Mass to the next closest available date.

Please complete the information below, be sure to print to avoid any possible errors.

On the line below please indicate who the Mass intention is for (e.g. John Doe, John & Jane Doe, The Doe Family)

Circle one: Living or Deceased

I do not have a specific date to request, please assign the next available Mass. (Check the box)

Mass date and time requested: _____

Individual/Family name requesting Mass: _____

Requestor’s Phone Number: _____

Check Number: _____

Please mail the Mass Card to (please provide complete address in the space below):