

Shrine of Saint Joseph Catholic Church

ORDER FORM FOR MEMORIAL CARD

In Memory of: _____

Living

Deceased

OR:

Special Intention:

This Memorial Gift is being made by: _____

Enclosed is my Check / Money Order in the amount of: \$ _____

Please mail the acknowledgment Memorial Card to my attention at the address below:

Name of Person Ordering Memorial Card: _____

Street Address: _____

OR:

City / State / Zip: _____

Please mail acknowledgment Memorial Card to the attention of the Person(s) at the address below:

(The Memorial card will indicate the Name of the Person(s) who made the request)

Name of Person(s) to receive Memorial Card: _____

Street Address: _____

City / State / Zip: _____

The memorial card will read:

A Gift has been received from _____. In Memory (or Special Intention) of _____.
This gift will help further the cause of the restoration and preservation of the historic Shrine of St. Joseph.
In addition, the above named person will be remembered in all Masses that will be offered at the Shrine.
Be assured that St. Joseph hears all prayers of those who go to him.

Mail the completed form together with Memorial Gift to:

The Shrine of St. Joseph Catholic Church

Attn: Memorial Gift Card

1220 N. 11th Street

St. Louis, MO 63106-4614

Check or Money order payable to: The Shrine of St. Joseph

Additional Questions? Please call 314-231-9407 or e-mail: info@shrineofstjoseph.org

[Click to
PRINT FORM](#)