

**Please fill out this form and mail it to:**

Missionary Oblates of Mary Immaculate  
 9480 N. De Mazenod Drive  
 Belleville, IL 62223-1160



**MISSIONARY  
 OBLATES**  
OF  
 MARY IMMACULATE  
 THE NATIONAL SHRINE OF  
 OUR LADY OF THE SNOWS

Dear Fr. John, enclosed is my donation of:

\$15    \$12    \$18    \$20    \$25    \$50    \$100    \$\_\_\_\_\_

Please send for my offering of:                       I choose not to receive a gift.

\$12 each, \_\_\_\_\_ Angel of Hope Pins. (set of two) #4284

\$15 each, \_\_\_\_\_ St. Peregrine Bracelet(s). #4283

\$18 each, \_\_\_\_\_ Angel of Hope Glass Plaque Votive(s). #4280

\$20 each, \_\_\_\_\_ Angel of Hope Rosary and Prayer Book Set(s). #6076

\$25 each, \_\_\_\_\_ Candle(s) of Hope at the National Shrine of Our Lady of the Snows for: \_\_\_\_\_ . #325

\$50 each, \_\_\_\_\_ Lourdes Healing Candle(s) at the Sacred Grotto in Lourdes, France for: \_\_\_\_\_ . #328

E-mail: \_\_\_\_\_

Please send me more Cards of Hope. #3770

**DONATE NOW TOLL FREE AT:**  
**1-888-330-6264**  
 7:00 a.m. - 7:00 p.m. Central, M-F  
 Any gifts requested through the mail will  
 be received within 3 - 6 weeks.

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ ZIP \_\_\_\_\_

E-mail \_\_\_\_\_

Make check/money order payable to:  
**MISSIONARY OBLATES**

<b>My Cancer Donation</b>	<b>\$</b>
Additional donation to support retired Oblate priests	<b>\$</b>
<b>Donation TOTAL</b>	

Check/Money Order               Total \$ \_\_\_\_\_ Exp. Date

Credit Card#                        Print Name \_\_\_\_\_

Signature (required) \_\_\_\_\_ Telephone Number \_\_\_\_\_

I would like to make a **monthly** donation of \$\_\_\_\_\_ by credit card. I authorize the Missionary Association to make a monthly withdrawal in this amount.

### Prayer Petition Form

The Missionary Oblates want to pray for your needs, as well as the needs of your loved ones. Please write the names of loved ones affected by cancer and your special intentions below. They will be remembered by my fellow Oblates and me.

*Names of my loved ones affected by cancer:* \_\_\_\_\_

\_\_\_\_\_

*My special intentions:* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_