



19795 HOLYOKE AVENUE
LAKEVILLE, MN 55044
school.allsaintschurch.com
952-469-3332

What a Difference a Day Makes

Sponsor's Name: _____

Address: _____

City, State, Zip Code: _____

Email: _____

Phone Number: _____

Date to Sponsor: _____ Suggested Donation: _____

Name of person(s) being honored or memorialized: _____

Specific prayer intention: _____

(anniversary, baptism date, anniversary of death, birthday of deceased, recovery of illness, thinking of you, etc.)

A prayer card will be sent to the person listed above on the date sponsored. If you would like us to send it someone other than the sponsor, such as honoree or relative of the honoree or person being memorialized, please fill in their information below:

Name: _____

Address: _____

City, State, Zip Code: _____

Would you like to remain anonymous when the prayer card is sent to the person(s) above? Yes No

For more information, go to school.allsaintschurch.com/WDDM/ or contact program coordinator, Gina Hoffman, at 952-953-3302 or ginaandbillhoffman@yahoo.com.

If you are a parishioner, please include your envelope number in the memo line if paying by check.

