



Sacred Heart Parish

17 Washington Street

PARIS - ONTARIO

N3L 2A2

Telephone (519) 442-2465

Date: _____

NAME _____ Envelope # _____

_____ (number of people in your group/family) who will attend Christmas Mass at Sacred Heart Church

CONTACT PHONE NUMBER _____

CONTACT EMAIL: _____

CHRISTMAS EVE

5PM Mass

7PM Mass

9PM Mass

CHRISTMAS DAY

9AM Mass

I understand that all COVID-19 protocols will be in place, including the mandatory wearing of masks, and that once church capacity has been reached per the government restrictions in effect at the time, entrance to the church will be closed.

It is the intention of Sacred Heart Parish to provide the safest environment for all and so we ask for return of this completed form as soon as possible so that we may prepare our Christmas celebrations accordingly. It is our sincere hope that by completing and returning this form, we may pre-determine an approximate number of attendees for each Christmas celebration Mass and thus have all the required protocols in place subject to government regulation.

Thank you.

Father Joseph Okoko, ivDEI

Gerry Paxton, Chairman, Sacred Heart Parish Council

PLEASE RETURN THE COMPLETED FORM TO THE CHURCH NO LATER THAN DECEMBER 19, 2021. You may also deliver your completed form via email to gerrypaxton@hotmail.com on or before December 19, 2021.