



I _____ if chosen to attend Mass celebrated by Pope Benedict XVI, commit to attending and preparing spiritually for this graced moment in the life of the Catholic Church in the United States.

Due to increased security procedures, all who will be attending the Mass will be required to be seated 2-3 hours prior to the start of the liturgy.

IMPORTANT

YOU MUST LIST THE NAME, ADDRESS, DATE OF BIRTH AND PHONE NUMBER FOR EACH PERSON FOR WHOM YOU ARE REQUESTING A TICKET. UNLESS THIS INFORMATION IS PROVIDED, YOUR REQUEST WILL NOT BE INCLUDED IN THE LOTTERY

I request: _____ 1 ticket _____ 2 tickets

Name: _____

Complete Address: _____

Date of Birth: _____ Phone number: _____

Name: _____

Complete Address: _____

Date of Birth: _____ Phone number: _____

**PLEASE RETURN THIS FORM BY JANUARY 31, 2008 TO:
CHANCELLOR
DIOCESE OF ROCKVILLE CENTRE
POST OFFICE BOX 9023
ROCKVILLE CENTRE, NY 11571-9023**