



Parish Preference Form

2021 Missionary Cooperation Plan

Indicate your preferences for hosting a missionary visitor next summer. Please note that the 2021 Mission Coop Plan is contingent upon public health guidelines. Fax, email or mail this form **by December 31, 2020.**

Parish Name: _____

Church sites (if applicable): _____

Street Address & City: _____

Web Address (if applicable): _____

Pastor/Administrator: _____

Best Email Address: _____

Email Contact Name (if not pastor): _____

Check preferences for your missionary visitor

Type:	Language(s):
<input type="checkbox"/> No Preference	<input type="checkbox"/> English Only
<input type="checkbox"/> Priest	<input type="checkbox"/> English/Spanish
<input type="checkbox"/> Religious Sister or Brother	<input type="checkbox"/> English/Polish
<input type="checkbox"/> Lay Missionary	<input type="checkbox"/> English/Polish/Spanish
<input type="checkbox"/> Specific Organization (Indicate below)	<input type="checkbox"/> Other Language(s): _____

Specific Organization Request

Name of Organization: _____

Contact Person: _____

Address/Phone: _____

Email Address: _____

How many collection envelopes should we send?

English envelopes: _____

Spanish envelopes: _____

Send this form no later than December 31, 2020

Mail: Mission Office Appeals Coordinator, 3525 South Lake Park Avenue, Chicago, IL 60653

Email: missions@archchicago.org

Fax: 312.534.1599