

BULLETIN INSERT REQUEST FORM

Name of Organization: _____

Event Name: _____

Requested Insert Date: _____

*Inserts will normally be one-sided.
A two-sided insert must be specifically requested.
Please check if this applies to your request:*

Two-sided

Contact Person Phone: _____

Contact Person e-mail: _____

*You will be notified via e-mail
of the status/confirmation of your insert request.*

All publication materials need to be approved by the Pastoral Staff.

**Bulletin Insert must be submitted electronically as a
Word or Publisher File to**

Polly Wise, pwise@stmaryhudson.cc

Noreen Feldman, nfeldman@stmaryhudson.cc

Notes: