

Prayer Quilt Ministry

Recipients name: _____

Your name, email and phone (sponsor):

Tell us something about the recipient (where are they from, what career/
volunteering did they do, married, kids, etc.)

Condition: _____

What should we pray for: _____

Please send the completed form to sesprayerquilt@gmail.com
or drop off at the Parish Office in an envelope
marked "Prayer Quilt Ministry".