



ROMAN CATHOLIC CHURCH IN THE STATE OF HAWAII
DIOCESE OF HONOLULU
WITNESS TO JESUS

Read the **PROTOCOL** before filling out this form

Date

Name of requestor: (clergy or religious)

First name

Last name

Contact information

Phone

Email address

Relic(s) requested:

St. Damien

St. Marianne

Requested dates of veneration:
(Mo / Day / Year)

From:

To:

Location of veneration:
(one form for each church)

Diocese:

Church:

Address:

City

State

Zip

Country

As Pastor, I am requesting the relic(s) on behalf of my parish/school. The relic(s) will be used for public veneration by the faithful (not for private use) and to promote devotion to Jesus, The Divine Mercy. Relic(s) will be kept in the church when not being venerated by the faithful.

Parish Seal

Pastor's signature: