



# Intercessors

*Watch Out For and Pray*

## Subscription Form \*

Surname : .....

First Name : .....

Date of Birth : .....

Address :

.....  
.....  
.....

Tel : .....

Email : .....

Team of Our Lady (if applicable) :

.....

**\*Please write in capitals**

I wish to sign up to

Pray on the ..... of every month, from .... To .... o'clock

Fast on the ..... Of every month

Offer up my life in its hardships and joys

Do you wish to receive the Intercessor's Newsletter 4 times a year? Yes  No

Would you like to receive extra prayers via email? Yes  No

**To be returned to Intercessors' Office Teams of Our Lady**

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