



A NOVENA OF MASSES

in honor of

CHRIST OUR SAVIOR – 2021

April 4th to 12th

TO BE OFFERED FOR THE INTENTIONS OF ALL
CONFRATERNITY MEMBERS AND SUPPORTERS

If you still are not able to attend Mass we ask you to participate fully in the Novena by:

- 1) Making a Spiritual Communion each day during the Novena, and
- 2) By praying the Rosary each day during the Novena.

Daily Mass is available on EWTN. We will not be streaming the Mass at the Rosary Center. Your local Bishop may also have suggestions on where to see Mass. Also, the Holy Father, Pope Francis, has issued special indulgences because of the worldwide pandemic.

Spiritual Communion: My Jesus, I believe that you are present in the most Blessed Sacrament. I love You above all things and I desire to receive You into my soul. Since I cannot now receive You sacramentally, come at least spiritually into my heart. I embrace You as if You were already there, and unite myself wholly to You. Never permit me to be separated from You. Amen.

NOVENA PRAYER

O Jesus, by your death and resurrection you conquered sin and death, and gave us the assurance of our own future resurrection. Grant, by your infinite merits, that we may be strengthened in the trials of this life, and filled with hope to share in your glory in the life to come.

O Mary, my Mother, share with me the adoration and love that filled your heart on Calvary, and the unspeakable joy that flooded your soul at the Resurrection of your Son. Help me ever to look forward to that glorious day when, please God, I and all my family will share the glory of your Son. Pray for us now, and at the hour of our death.

(Here make your requests.)

THE MEMORARE

Remember, O most gracious Virgin Mary, that never was it known that anyone who fled to thy protection, implored thy help, or sought thy intercession, was left unaided. Inspired with this confidence, I fly unto thee, O Virgin of Virgins, my Mother; to thee I come, before thee I stand, sinful and sorrowful; O Mother of the Word Incarnate, despise not my petitions, but in thy mercy hear and answer me.

(Add your daily Rosary)

INTENTIONS FOR THIS NOVENA
CHRIST OUR SAVIOR - 2021

- | | | |
|--------------------------------------------------------------|--------------------------|--------------------|
| For all members of the Rosary Confraternity | <input type="checkbox"/> | Name: _____ |
| For the sick and dying | <input type="checkbox"/> | Address: _____ |
| For the souls in purgatory | <input type="checkbox"/> | City,St,Zip: _____ |
| For a conversion | <input type="checkbox"/> | Phone: _____ |
| For Our Holy Father | <input type="checkbox"/> | Email: _____ |
| For a family | <input type="checkbox"/> | |
| For return to the faith | <input type="checkbox"/> | |
| For suitable work | <input type="checkbox"/> | |
| For peace of mind | <input type="checkbox"/> | |
| For world peace..... | <input type="checkbox"/> | |
| For priestly and religious vocations | <input type="checkbox"/> | |
| To know my vocation | <input type="checkbox"/> | |
| For a happy death | <input type="checkbox"/> | |
| In Honor of the Blessed Virgin Mary..... | <input type="checkbox"/> | |
| In Honor of the Holy Spirit | <input type="checkbox"/> | |
| To spread devotion to the Rosary..... | <input type="checkbox"/> | |
| For the world wide success of the
Pro-Life Movement | <input type="checkbox"/> | |
| For a Special Intention | <input type="checkbox"/> | |
- Other Intentions

(optional donation section)

In Honor of the Queen of the Most Holy Rosary

I make the following donation:

- | | |
|--------------------------------------------------------------------|----------|
| To Support the Rosary Confraternity Apostolate..... | \$ _____ |
| For Renovation of the Rosary Center | _____ |
| For the Religious Education of Dominican students and Novices..... | _____ |
| For the aged and infirm Dominican Fathers & Brothers | _____ |
| To have a votive (1 Day, \$1 each).....(how many) _____(x1=)..... | _____ |
| candle lit at the (3 Days, \$3 each.....(how many) _____(x3=)..... | _____ |
| Rosary Shrine (6 Days, \$5 each).....(how many) _____(x5=)..... | _____ |
| Total Donation Amount | \$ _____ |

All Contributions are tax deductible.
Either mail a check with this form or:
Card #: _____ Exp Date: ___/___ Code: _____ (back)
Signature: _____
Please acknowledge... No need to acknowledge...

Fill in and return to:
The Rosary Center - Dominican Fathers
PO Box 3617
Portland, Oregon 97208