

# Coordinate Dates for Mission Cooperation (MCP) Appeal – 2025

## Missionaries Information

**Please complete and send to Pastors of assigned parishes before dates are mutually agreed.**

Appeals are to be made from May – August 31st.

Mission Group Name \_\_\_\_\_

Contact Person(s) \_\_\_\_\_

Name of Person Making Appeal if different from Contact Person:

\_\_\_\_\_

Phone Number \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ FAX \_\_\_\_\_

\_\_\_\_\_ Email \_\_\_\_\_

Accommodations required: Number of Nights \_\_\_\_\_

1. Emergency Phone Number for Person Making the Appeal:

\_\_\_\_\_

2. In case of a medical emergency, who should be notified and to whom should all bills be sent:

\_\_\_\_\_ Phone \_\_\_\_\_