

## SALESIAN CROSSES



1



2



3



4

Kindly send me \_\_\_\_\_ of Number 1 2 3 4  
*Number of crosses* *Circle number*

My Mailing address:

Name: \_\_\_\_\_

Street: \_\_\_\_\_ Apt: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

Phone number: \_\_\_\_\_

I am enclosing a check or money order for ( \_\_\_ Crosses at \$5.00 each) \_\_\_\_\_

*Please make checks payable to: Salesian Vocation Office*

**SUGGESTED DONATION PER CROSS \$5**

*Please send donation to:*

Fr. Franco  
Salesian Vocation Office  
315 Self Place  
South Orange, NJ 07079  
973 761 0201