

ST. JOHN THE BAPTIST PARISH
LITURGICAL MINISTER INFORMATION FORM

Last Name			
First Name			
Address			
City/State/Zip			
Home Phone		Cell Phone	
Email			

Received the Sacrament of Baptism Eucharist Confirmation *(Check all that apply)*

If married, was married / convalidated by a priest or deacon Yes No

LITURGICAL MINISTRY INFORMATION

Please check all that apply.

- Altar Server
- Camera Operator
- Cantor
- Extraordinary Minister of Holy Communion
- Greeter
- Homebound
- Lector
- Laundry – Purifiers, Towels...
- Nursing Home Mass / Prayer Service
- Usher
- I am willing to serve as a substitute only.
- Other – Please specify: _____

MASS PREFERENCES

Please check all that apply.

- I am willing to serve at any Mass time.
- Saturday, 4:00PM
- Sunday, 8:30AM
- Sunday, 11:15AM
- Weekday masses (circle all that apply): Monday, Tuesday, Wednesday, Thursday, Friday, Saturday
- I prefer my family be scheduled together.
Please list names: _____
- I can only serve on certain weekends (i.e. 1st Sunday of the Month).
Please specify: _____
- I am not available some weekends during the months of June, July & August.
Please specify dates: _____