

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 <input type="checkbox"/> Baptism <input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation <i>(Check all that apply)</i>			
If married, was married / convalidated by a priest or deacon <input type="checkbox"/> Yes <input type="checkbox"/> No			
LITURGICAL MINISTRY INFORMATION			
<i>Please check all that apply.</i>			
<input type="checkbox"/> Altar Server <input type="checkbox"/> Camera Operator <input type="checkbox"/> Cantor <input type="checkbox"/> Extraordinary Minister of Holy Communion <input type="checkbox"/> Greeter <input type="checkbox"/> Homebound <input type="checkbox"/> Lector <input type="checkbox"/> Laundry – Purificators, Towels... <input type="checkbox"/> Nursing Home Mass / Prayer Service <input type="checkbox"/> Usher <input type="checkbox"/> I am willing to serve as a substitute only. <input type="checkbox"/> Other – Please specify: _____			
MASS PREFERENCES			
<i>Please check all that apply.</i>			
<input type="checkbox"/> I am willing to serve at any Mass time. <input type="checkbox"/> Saturday, 4:00PM <input type="checkbox"/> Sunday, 8:30AM <input type="checkbox"/> Sunday, 11:15AM <input type="checkbox"/> Weekday masses (circle all that apply): Monday, Tuesday, Wednesday, Thursday, Friday, Saturday <input type="checkbox"/> I prefer my family be scheduled together. Please list names: _____ <input type="checkbox"/> I can only serve on certain weekends (i.e. 1 st Sunday of the Month). Please specify: _____ <input type="checkbox"/> I am not available some weekends during the months of June, July & August. Please specify dates: _____			