

LITURGICAL MINISTRIES, INFANT OF PRAGUE CATHOLIC CHURCH

UPDATE/APPLICATION

_____ Mark here if you are a trained and registered minister of the parish and please provide the appropriate information below to update the parish rosters.

_____ Mark here if you wish to volunteer to be a Liturgical Minister and please provide the appropriate information below for our records.

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

	Mark all services you are trained for.	Mark all the services you wish to volunteer for.	Please indicate 1 or 2 preferred ministries.
Sacristan			
Commentator			
Reader			
Eucharistic Minister			
Altar Server			
Hospitality Minister			

Preferred Mass - Circle (Sat 5:00 PM, Sun 8:00 AM, 10:00 AM, 12:30 PM)

_____ Please circle either YES or NO for each statement that follows:

Yes No I am at least sixteen years old.

Yes No I have received the Sacraments of Initiation (Baptism, Confirmation and Holy Eucharist) in the Catholic Church.

Yes No For those who are married, that your marriage is recognized in the Catholic Church.

Yes No I am in good standing with the Catholic Faith.

By my signature below, I testify that the above provided information is truthful and accurate.

Signature _____ Date _____