



VOLUNTEER INFORMATION

First Name _____

Last Name _____

Email _____

Home Phone _____

Cell Phone _____

Address _____

ADDITIONAL INFORMATION

In which Ministries do you currently serve? Check ALL that apply.

- ☐ Hospitality Ministry
- ☐ Extraordinary Minister of Holy Communion
- ☐ Altar Server
- ☐ Reader
- ☐ Other (please list) _____

My preferred Mass is:

- ☐ Saturday 5:00 P.M.
- ☐ Sunday 7:00 A.M.
- ☐ Sunday 8:30 A.M.
- ☐ Sunday 10:30 A.M.
- ☐ Sunday 12:30 P.M.
- ☐ Sunday 5:00 P.M.

I am available to serve for Holy Days of Obligation and other special Masses or services.

- ☐ Yes
- ☐ No

Languages spoken:

- ☐ English
- ☐ Spanish
- ☐ Other (list language) _____

Family Members who also serve in church ministries (this is for scheduling reasons):

Please continue on the back of page, if necessary

Name	Ministry

Thank you for your interest in the liturgical ministries at St. Michael. We look forward to working with you.