

## **Eucharistic Minister / Lector Information Sheet**

Please fill out form so that we know what Masses you would prefer to serve.

### **PLEASE PRINT**

I would like to serve as a            Eucharistic Minister (  )            Lector (  )

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

My preference to serve at the following Mass is:

- |   |  |
|---|--|
| <input type="checkbox"/> Saturday, 5:30 PM                            | <input type="checkbox"/> Sunday 10:15 AM   |
| <input type="checkbox"/> Sunday, 7:30 AM                              | <input type="checkbox"/> Sunday 12:00 Noon |
| <input type="checkbox"/> I am flexible and can volunteer at any mass. |  |

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please note: When given the assigned month to serve, if for any reason you cannot serve a particular Mass, kindly call a replacement.**

Please email, mail or drop-off the completed for to the Parish House

Thank You