



EXTRAORDINARY MINISTERS OF HOLY COMMUNION SCHEDULING PREFERENCE FORM SPRING 2018

Name: _____ E-mail address: _____

Street Address: _____ Have Diocesan Clearances: YES / NO

Home Phone: _____ Mobile Phone: _____

I AM (*circle one*): NEW / A CAPTAIN / NOT A CAPTAIN / WILLING TO BE A CAPTAIN

Home/Institutional Ministry : INTERESTED / NOT INTERESTED / ONLY INTERESTED IN THIS

I am at least 18 years of age: YES / NO

I have received all three Sacraments of Initiation (Baptism/Confirmation/Eucharist) in the Roman Catholic Church: YES / NO

I am registered at Saint Ferdinand Parish and am a practicing Catholic in good standing with the Church? YES / NO
You may wish to discuss any personal issues with the pastor directly in regards to this statement.

SATURDAY/SUNDAY LITURGIES

PLEASE CHOOSE THE ONE OPTION THAT BEST FITS YOUR SCHEDULING NEEDS.

OPTION 1 (*the same Liturgy all Saturdays/Sundays of the month for alternating months*): YES / NO

I would prefer to be scheduled at the _____ every week of the ODD / EVEN months of the year.
(Mass Time)

-OR-

OPTION 2: (*varying Liturgy times and frequencies as indicated below*): YES / NO

Please rank your scheduling preferences of each Mass using a 1 – 6 rating, 1 being your first choice and 6 being your last choice. Please mark an X by any Mass you absolutely CANNOT incorporate into your schedule.

REGULARLY SCHEDULED SUNDAY LITURGIES:

___ Saturday 4:00 PM

___ Saturday 6:00 PM

___ Sunday 8:00 AM

___ Sunday 10:00 AM

___ Sunday 12:00 NN

___ Sunday 5:00 PM

Ideally, I would prefer to be scheduled: NO PREFERENCE

ONCE A MONTH

TWICE A MONTH

AS FREQUENTLY AS NEEDED

Please schedule me with: _____
(Family Member Name and their Ministries)

Per the Pastor, all "substitutes" must commit to at least one scheduled Liturgy per month. Please indicate your preference above.

HOLY DAYS OF OBLIGATION

(check the times you wish to serve or leave blank)

___ Vigil 7:00 PM

___ 8:30 AM

___ 12:00 NN

___ 7:00PM

-PLEASE SEE REVERSE SIDE-

DAILY LITURGIES*(check the times you wish to serve or leave blank)*

Monday 6:30 AM Monday 8:30 AM Tuesday 8:30 AM Tuesday 7:00 PM
 Wednesday 8:30 AM Wednesday 7:00 PM Thursday 8:30 AM Thursday 7:00 PM
 Friday 6:30 AM Friday 8:30 AM First Friday 7:00 PM Saturday 8:30 AM

FUNERAL LITURGIES*(check the times you wish to serve or leave blank)*

Monday - Thursday Funerals (*usually 10:00 AM*) Weekend Funerals (*usually 10:00 AM*)
 Friday Funerals (*usually 11:00 AM/12:00 NN*)

Scan/e-mail to bgh623@gmail.com / drop in collection basket / return to parish office**FOR OFFICE USE ONLY**

Date Received by Parish Office: _____

Date Forwarded to Dr. Brian Hart: _____

Date Forwarded to Fr. John Gallagher: _____

| | | | |
|-----------------|-----------------|---------------------|--------------|
| Outcome: | APPROVED | NOT APPROVED | OTHER |
|-----------------|-----------------|---------------------|--------------|

Notes:

Date Forwarded to Ms. Bunny LaGamba: _____

Registered w/Diocesan Database: YES / NO

Pastoral Code of Conduct Signed: YES / NO

Protecting God's Children: YES / NO

State Clearances: YES / NO

Fingerprint Application / Waiver YES / NO

Date of Commissioning to Ministry: _____

Please forward completed form to the Office of Music Ministry and Liturgy once this process is completed.