


Our Lady of Mount Carmel

Altar Server Registration Form

Date Application Submitted <hr style="width: 80%; margin: 10px auto;"/>	Date Trained <hr style="width: 80%; margin: 10px auto;"/>	Requested Mass time (5PM, 8AM, 10AM 12PM) 1 st Choice: _____ 2 nd Choice: _____ 3 rd Choice: _____
Child's First Name (Print)	Child's Middle Name (Print)	Child's Last Name (Print)
Child's Date of Birth (Print)	Male <input type="checkbox"/> Female <input type="checkbox"/>	Place of Birth (Location, City, State) (Print)
Mother's First Name (Please print)	Mother's Middle Name	Mother's Last Name
Father's First Name (Please print)	Father's Middle Name	Father's Last Name
Mailing Address (Please print)	City: _____ Zip Code: _____	Home Phone: _____ Mother's Cell Phone: _____ Father's Cell Phone: _____ Email: _____
<input type="checkbox"/> I agree to allow my child to serve as an altar server. <input type="checkbox"/> I agree to support my son/daughter in their ministry. <input type="checkbox"/> I agree to bring my son/daughter no later than 15 minutes prior to mass. <input type="checkbox"/> I understand that my son/daughter is responsible to find a replacement if unable to serve.		<input type="checkbox"/> I agree to allow my child to serve as an altar server. <input type="checkbox"/> I agree to support my son/daughter in their ministry. <input type="checkbox"/> I agree to bring my son/daughter no later than 15 minutes prior to mass. <input type="checkbox"/> I understand that my son/daughter is responsible to find a replacement if unable to serve.
Mother's Signature: <hr style="width: 80%; margin: 10px auto;"/>		Father's Signature: <hr style="width: 80%; margin: 10px auto;"/>