

BLESSED JOHN XXIII ROMAN CATHOLIC CHURCH
Volunteer Information

Date of application _____

Meeting with Pastor _____

Name _____

Matrimonial Status: Single Married in the Catholic Church
 Married Civilly

Address: _____

Phone: Home: _____ **Cell:** _____

E-Mail: _____ @ _____

Ministry you are volunteering for: _____

Brief reason why this ministry: _____

Please answer a few questions about yourself.

Date of Birth: _____

Languages you speak _____

When are you available to serve: (for example only evenings, days or weekends, Monday only etc)

_____.

Sacrament Information: Check all sacraments **you** have received in the Catholic Church. Baptism Holy Communion Confirmation Matrimony

Remember all volunteers must attend a Virtus class and be fingerprinted.

Status: For office use only

Ready to serve On hold Date: _____ Signature _____