

EXTRAORDINARY MINISTER

NAME: _____

ADDRESS: _____

HOME PHONE _____ WORK PHONE _____

E-MAIL _____

ARE YOU 18 OR OLDER _____

IF UNDER 18 HOW OLD? _____

Which Sacraments have you received? (Circle)

BAPTISM YES NO

FIRST PENANCE & RECONCILIATION YES NO

FIRST COMMUNION YES NO

CONFIRMATION YES NO

Marital Status:

SINGLE _____ ENGAGED _____ MARRIED _____

SEPARATED _____ WIDOWED _____ DIVORCED _____

If married or engaged, is this or will it be your first marriage? _____

If married or engaged, is this or will it be your spouse/fiancée's first marriage? _____

If married or engaged, were you or will you be married by a Catholic bishop, priest, or deacon in a Catholic Church? _____

Extraordinary Minister Information Form

Name: _____

Age: _____

Address: _____

Phone Numbers: Home _____ Cell _____

(please circle preferred number for contact by St. Michael)

E-mail address: _____

Occupation: _____

Are you registered member of St. Michael Parish? _____ How long? _____

If not registered in St. Michaels, in what parish have you been registered?

Name of parish _____ city and state: _____

Marital Status (please circle one): single/engaged/married/widowed/divorced

If engaged or married: Name of Spouse (Fiancé) _____

Is this or will this be a Catholic marriage: Yes / No. Marriage date: _____

Church, city and state of marriage: _____

When and where were you baptized: _____

When and where were you confirmed: _____

How often do you attend Mass: _____

What is your preferred Mass time? _____

Could you serve as an extraordinary minister to the sick? Yes / No

What attracts you to become an extraordinary minister?

Please list any other activities in which you are involved at St. Michael:

If usher, please list months that you serve: _____

I certify that I am a practicing Catholic in good standing with the Catholic Church. I hereby renew my commitment to respect and obey teachings of the Church. I also renew my profession of faith in the Real Presence of Jesus Christ in the Eucharist, and I promise to handle the Precious Body and Blood with reverence, and only as directed by the Bishop, Priests and Deacons of the Church.

Signed _____ Date: _____

Please Print Name: _____