



# Volunteer Information

---

Full Name \_\_\_\_\_  
*First Middle Initial Last*

Address \_\_\_\_\_  
*Street Address, Apartment/Unit #, City, State, Zip Code*

Best Phone Number to reach you: \_\_\_\_\_ Cell  Land Line

Email \_\_\_\_\_

Parish Affiliation \_\_\_\_\_

## Ministry Interests

### Faith Formation

- Adult
- Children\*
- RCIA
- Youth\*

### St. Joseph School

- Volunteer\*

### Parish Support

- Secretarial
- Business Office\*\*

### Funerals

- Receptions
- Coordinator

### Socials

- Coffee and Donuts
- Parish Picnic
- Other Events

### Other Ministries

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Liturgy

- Altar Servers
- Altar Society
- C.A.R.E.\*\*
- Decorating
- Eucharistic Adoration
- Extraordinary Minister  
of Holy Communion (EMHC)
- Hospitality/Greeter
- Lector
- Master of Ceremony
- Sound
- Usher\*\*

### EMHC

- At Mass
- Homebound\*
- Care Facility\*
- Hospital\*

### Music

- Cantor
- Choirs
- Groups
- Handbell Choir
- Instrumentalist

### Serving Preference

- Sat. Vigil/ Sunday

#### Mass Time Preference:

- \_\_\_\_\_
- Weekdays

---

Please complete, save to your device and return to Jeanette Coleman: [jlcoleman@stjosephfc.org](mailto:jlcoleman@stjosephfc.org)

\* Requires Safe Environment Training, Read & Sign Volunteer Code of Conduct, Background Check

\*\* Requires Background Check