

St. Genevieve Catholic Church Ministry Application Form

Ministry you are interested in: _____ Today's Date: _____

Last Name	First Name	Middle Initial	
Street Address			Apt. #
City	State	Cell Phone	Home Phone
Email		Date of Birth	

1. **Marital Status:** Single Married Divorced Widowed

2. **Are you currently employed:** Yes No

3. **Are you a registered member of St. Genevieve Catholic Church?** Yes No

4. **How have you been a member of St. Genevieve Catholic Church?** _____

5. **Which Masses do you attend?** Sat 5:00 p.m. Sat 7:00 p.m. Sun 6:30 a.m. Sun 8:00 a.m.
 Sun 9:30 a.m. 11:00 a.m. 12:30 p.m. 2:00 p.m.

6. **What sacraments have you received?** (Note to be a liturgical ministry, you must have received all the sacraments of initiation: Baptism, Confirmation, Eucharist) Baptism Confirmation Eucharist

7. **Please write down a short paragraph why you want to involve in this ministry?**

The information contained in this application is correct to the best of my knowledge. I understand that my participation in this ministry require that I adhere to the teachings of the Roman Catholic Church and the requirements of the Archdiocese of Los Angeles and this Parish.

Signature: _____ Date: _____