

**EUCCHARISTIC MINISTER INFORMATION**

Name: \_\_\_\_\_

Email Address (optional) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number(s) Indicate Home, Work, etc.

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

Have you taken Safe Environment Training? \_\_\_\_\_ If so, when? \_\_\_\_\_

If under 18 years old: Grade \_\_\_\_\_ Age \_\_\_\_\_

Parent Email Address (if under 18 years old): \_\_\_\_\_

Parent's cell phone: \_\_\_\_\_

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**MASS PREFERENCE (please circle one)**

**5:00 PM      9:00 AM      11:00 AM      4:00 PM**

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## **EUCCHARISTIC MINISTRY CONTRACT\*\*\***

I, \_\_\_\_\_, understand that Eucharistic Ministers are very important in adding reverence to the Mass and in helping the Mass run smoothly.

I have read the Qualification for Eucharistic Ministers and I agree:

- To be current on my Safe Environment Training.
- To participate in training sessions and any other meetings of this ministry.
- To arrive 15 minutes early for the Mass at which I am scheduled. To check in and pick up a badge.
- To get a substitute when I am unable to serve on my scheduled date.
- To volunteer to serve at Masses when there is a need and I am not scheduled.
- To keep my profile up to date in the Ministry Scheduler Pro.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

### **PARENTS:** (required for those who are under the age of 18 years old)

As a parent (or guardian), I agree that my son/daughter may be contacted directly by email or phone/text to make scheduling arrangements for this ministry.

As a parent (or guardian), I agree to see that my son/daughter has transportation for the training sessions and his/her scheduled times to serve.

As a parent (or guardian), I agree to assist in the scheduling process by submitting dates when my son/daughter will be unavailable.

Signature of Parent \_\_\_\_\_

Date: \_\_\_\_\_