Name: ____________________________________________ Home Phone: ________________ Mobile Phone: ________________

Email Address: ______________________________________________________________________________________

Options:
I would like to be involved in the Catholic Faith Formation Program in the following way: (Please circle one)

Catechist  Catechist’s Assistant  Substitute Catechist  Office Volunteer

(Note: ALL Volunteers will be asked to complete a background check and attend an OVASE Training.)

Grades K—8:
☐ I am willing to be a Catechist.  ☐ I am willing to be a Catechist’s Assistant.
☐ I am willing to be a Substitute Catechist.  ☐ I would like to team teach with ____________________________
☐ Sunday at 10:15am to 1:15pm (includes 12:00pm Mass)  Grade preference __________
☐ Wednesday at 6:30pm—8:45pm (Adult Education)  Day _____________  Grade ________________
☐ I am willing to work in the nursery watching children during parent or catechist meetings.
  ☐ Catechist’s Children  ☐ Parent’s Children

Sacramental Programs:
☐ I am willing to assist in the following Sacramental Program:
  ☐ First Eucharist  ☐ First Reconciliation  ☐ RCIA adapted for Children  ☐ RCIA (Sunday 12:00pm to 2:00pm)

Office Volunteers:
☐ Sunday 9:00 am to 12:00 pm
(Note: Faith Formation Office open on Mondays and Wednesdays from 9:00am to 6:00pm)
☐ Monday— Time: __________ to __________  ☐ Wednesday — Time: __________ to __________