



ADULT VOLUNTEER INFORMATION: RENEWAL FORM

It is the policy of the Archdiocese to monitor all Volunteer Ministry Positions.

Complete ONLY if there are changes to the ministries you are volunteering for, a change in demographic information or you are a new volunteer. We will continue to schedule you in the previously designated ministries.

Only complete if there has been a change in information or if you are new to the ministry.

Name: _____

Address: _____

City/Town: _____ Province: _____ Postal Code: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Emergency Contact:

Name: _____ Relationship to Applicant: _____

Phone: (Home) _____ Cell: _____

Ministries:

Which **new** ministries do you wish to become involved?

- Team Back Up Team Talks Small Group Leader Kitchen
- Spiritual Director Liturgy Music Ministry Prayer
- Vocations Talk (Single, Marriage, Religious Life, Priesthood)
- Other _____

Are there any ministries that you wish to withdraw from?

- Team Back Up Team Talks Small Group Leader Kitchen
- Spiritual Director Liturgy Music Ministry Prayer
- Vocations Talk (Single, Marriage, Religious Life, Priesthood)
- Other _____

(Signature of Applicant)

(Date)