

14404 – 14th Street
Dade City, FL 33523**Attention Readers and Eucharistic Ministers (English Masses Only).**

Help us update our Ministry Members Directory. We need this information for Scheduling.
Use this form to (1) update current members, (2) add new members, or (3) cancel existing membership.
Please fill out one form per individual member and return all forms to the Parish Office.

Your Full Name: _____

Your Mailing Address: _____

City: _____ State: _____ Zip: _____

Primary Phone: _____ **Email Address:** _____
Required: (area code) & number optional

Preferred method of contact: Phone Email

CURRENT MEMBERS: If you wish to make any changes to the Masses or Ministries that you participate in, please indicate your preferences in the table below. If for any reason you need to cancel your participation please indicate that also so you will not be included in future schedules. You can renew at any time by submitting this form.

NEW MEMBERS: If you wish to become a Reader or Eucharistic Minister please indicate in the table below which Masses and Ministries you wish to participate in. After this information is received, new applicants will be contacted in a timely manner.

Family Members: If you want to be grouped, be sure to check the *Same Mass Times* on each form. Also, indicate the same family group name here on each form: _____

IN THE NEXT ROW CHECK ONE BOX ONLY.

Today's Date _____

 I am updating I am new I need to cancel**I AM AVAILABLE FOR: (PLEASE CHECK ALL THAT APPLY IN THE TABLE BELOW)**

4:30 PM Saturday Mass	<input type="checkbox"/> 1 st Reader	<input type="checkbox"/> 2 nd Reader	<input type="checkbox"/> Eucharistic Minister
8:00 AM Sunday Mass	<input type="checkbox"/> 1 st Reader	<input type="checkbox"/> 2 nd Reader	<input type="checkbox"/> Eucharistic Minister
11:00 AM Sunday Mass	<input type="checkbox"/> 1 st Reader	<input type="checkbox"/> 2 nd Reader	<input type="checkbox"/> Eucharistic Minister

Restrictions if any: _____

If you are a winter visitor, please let us know when you will be available to serve.

Arrive in Florida: _____
(month)Leave Florida: _____
(month)

Thank you for your cooperation - -The Liturgy Committee.
If you have any questions about this form call Bob Schmirler (352) 567-7450