

Saint Agnes Parish

Extraordinary Minister of Holy Communion Application

Return to the Church Office or email to mcburniek@stagnesnj.com

NAME: _____

ADDRESS: _____

CITY: _____ ZIP: _____

PHONE: _____

EMAIL: _____

Do you regularly check your email? Yes No

MASS PREFERENCE

1st Choice: 5:00pm 7:30am 9:00am 10:15am 11:30am

2nd Choice: 5:00pm 7:30am 9:00am 10:15am 11:30am

WEEK PREFERENCE

Any week needed _____ OR

1st Choice: Week 1 Week 2 Week 3 Week 4

2nd Choice: Week 1 Week 2 Week 3 Week 4

Have you been trained? _____

Other comments: _____

Date _____