



Corpus Christi Altar Servers of St. Joseph REGISTRATION FORM



Date (m/d/y): _____

Altar Server's Name (First and Last names): _____

Elementary School: _____ Grade: ____ Age: ____

Secondary School: _____ Grade: ____ Age: ____

College/University/Work: _____ Year: ____ Age: ____

- Are you a Catholic? : Yes ____ No ____
- Have you received First Holy Communion? : Yes ____ No ____
- Are you or your family a registered parishioner of Corpus Christi Parish? : Yes ____ No ____

I am available to serve at the following Masses: (check (✓) all applicable days/times)

Saturday, 5:00 pm ____ Sunday, 9:00 am ____ Sunday, 11:00 am ____

Sunday, 3:00 pm (Cantonese Mass) ____

Wednesday (School Mass) 9:00 am ____ Weekdays and Saturday (Morning Mass) 8:00 am ____

First Friday Mass, 7:00 pm ____

Contact Information

Father: _____ cell: _____ email: _____

Mother: _____ cell: _____ email: _____

Home phone: _____ A. Server cell: _____ email: _____

Address: _____

Safe Environment Policy (SEP)

- * **7-14 years old:** parents must read and discuss the expectations and responsibilities of Altar Servers to your Altar Server child.
- * **15-18 years old:** complete SEP Screening Forms and submit to parish office-request form if needed.
- * **19 years and up:** complete SEP Screening Forms and submit to parish office-request form if needed.

Do you consent to your/son's photos/videos being posted on the church bulletin, church website and CC Instagram (your/his name will NOT be included)? Yes ____ No ____

Parent Signature: _____ Date (m/d/y): _____

Altar Server (19 years and up) Signature: _____ Date (m/d/y): _____