

All Information remains Confidential

# St. Raphael Parish Registration Form



ID #	_____
DUID #	_____
DATE	_____
LTR	_____
IS	_____
CALL	_____
STWD	_____

Head of Household Last Name \_\_\_\_\_  Jr.  Sr.  I  II

Head of Household First Name \_\_\_\_\_  Mr.  Mrs.  Ms.  Dr.

Spouse/Member \_\_\_\_\_  Mr.  Mrs.  Ms.  Dr.

Maiden Name \_\_\_\_\_

Family Status:  Married  Single/Cohabiting  Widowed  Separated  Divorced Are you interested in Online Giving?  Y  N

Street Address \_\_\_\_\_ Apt/Unit # \_\_\_\_\_ City & State \_\_\_\_\_ ZIP \_\_\_\_\_

Permanent  Seasonal (List month/day at seasonal residence) \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Would you like mail sent to seasonal address?  Y  N

Seasonal Address \_\_\_\_\_ Apt/Unit # \_\_\_\_\_ City & State \_\_\_\_\_ ZIP \_\_\_\_\_

Home Phone \_\_\_\_\_  Unpublished Preferred Phone # for general questions:  Home  His Mobile  Her Mobile

Preferred Family Email \_\_\_\_\_

If you live alone, please list an emergency contact person: Name \_\_\_\_\_ Phone: \_\_\_\_\_

Are there any homebound/bedridden persons in the household in need of Communion?  YES  NO

**FOR EACH MEMBER (INCLUDING THOSE LISTED ABOVE) PLEASE FILL IN THE INFORMATION BELOW**

	HEAD OF HOUSEHOLD	SPOUSE / MEMBER	CHILD / MEMBER 1	CHILD / MEMBER 2	CHILD / MEMBER 3	CHILD / MEMBER 4
First Name						
Last Name (If Different)						
Religion: 1-Cath, 2-Non Cath Christian, 3-Non Christian						
Handicap or Homebound						
Language(s) Spoken						
Ethnicity / Race						
Cell / Mobile Phone						
School Child Attends						
Current Grade or Degree: K, 1-12, AA, BA, BS, JD, MA, MS, MD, PHD						
Date of Birth (M / D / Y)	/ /	/ /	/ /	/ /	/ /	/ /
Gender	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> M <input type="checkbox"/> F
Baptized	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
City & Church of Baptism						
First Communion	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
Confirmed	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
City & Church of Confirmation						
Marital Status: 1-married, 2-single, 3-sep/div, 4-annulled, 5-widowed						
Date of Marriage (M / D / Y)	/ /	/ /				
Married by Cath. Priest/Deacon?	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO				

## Sharing Our Time and Talent

*We at St. Raphael believe in the “Stewardship Program” committed to serving the Lord with our God-given time, talents, and treasure. On this page we ask you to tell us a bit about yourself and ask in what ways you may want to offer your time and talent. A parish member will be contacting you shortly about your interests. If you would like to know more about the ministries at St. Raphael’s, visit the website at [www.st-raphaels.com](http://www.st-raphaels.com).*

### YOUR CURRENT OCCUPATION:

Check off “H” for Head of Household, “S” for Spouse as listed on front of form.

- |   |                          |                                    |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
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| <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Accounting / Finance</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Administrative / Clerical</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Arts / Theatre / Music</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Construction</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Education</td></tr> </table> | <b>H</b>                 | <b>S</b>                           |  | <input type="checkbox"/> | <input type="checkbox"/> | Accounting / Finance | <input type="checkbox"/> | <input type="checkbox"/> | Administrative / Clerical | <input type="checkbox"/> | <input type="checkbox"/> | Arts / Theatre / Music | <input type="checkbox"/> | <input type="checkbox"/> | Construction | <input type="checkbox"/> | <input type="checkbox"/> | Education | <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Govt / Public Service / Non Profit</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Healthcare</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Homemaker</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Hospitality / Food Service</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Legal</td></tr> </table> | <b>H</b> | <b>S</b> |  | <input type="checkbox"/> | <input type="checkbox"/> | Govt / Public Service / Non Profit | <input type="checkbox"/> | <input type="checkbox"/> | Healthcare | <input type="checkbox"/> | <input type="checkbox"/> | Homemaker | <input type="checkbox"/> | <input type="checkbox"/> | Hospitality / Food Service | <input type="checkbox"/> | <input type="checkbox"/> | Legal | <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Manufacturing</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Real Estate</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Retail / Grocery Store</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Sales / Marketing</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Skilled Vocation / Recreation</td></tr> </table> | <b>H</b> | <b>S</b> |  | <input type="checkbox"/> | <input type="checkbox"/> | Manufacturing | <input type="checkbox"/> | <input type="checkbox"/> | Real Estate | <input type="checkbox"/> | <input type="checkbox"/> | Retail / Grocery Store | <input type="checkbox"/> | <input type="checkbox"/> | Sales / Marketing | <input type="checkbox"/> | <input type="checkbox"/> | Skilled Vocation / Recreation | <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Technical / Info Systems</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Currently Retired</td></tr> </table> | <b>H</b> | <b>S</b> |  | <input type="checkbox"/> | <input type="checkbox"/> | Technical / Info Systems | <input type="checkbox"/> | <input type="checkbox"/> | Currently Retired |
| <b>H</b>  | <b>S</b>                 |                                    |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Accounting / Finance               |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Administrative / Clerical          |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Arts / Theatre / Music             |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Construction                       |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Education                          |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <b>H</b>  | <b>S</b>                 |                                    |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Govt / Public Service / Non Profit |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Healthcare                         |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Homemaker                          |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Hospitality / Food Service         |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Legal                              |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <b>H</b>  | <b>S</b>                 |                                    |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Manufacturing                      |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Real Estate                        |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Retail / Grocery Store             |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Sales / Marketing                  |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Skilled Vocation / Recreation      |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <b>H</b>  | <b>S</b>                 |                                    |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Technical / Info Systems           |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |
| <input type="checkbox"/>  | <input type="checkbox"/> | Currently Retired                  |  |                          |                          |                      |                          |                          |                           |                          |                          |                        |                          |                          |              |                          |                          |           |   |          |          |  |                          |                          |                                    |                          |                          |            |                          |                          |           |                          |                          |                            |                          |                          |       |   |          |          |  |                          |                          |               |                          |                          |             |                          |                          |                        |                          |                          |                   |                          |                          |                               |   |          |          |  |                          |                          |                          |                          |                          |                   |

### ABOUT YOUR MINISTRY INTERESTS:

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| <b>LITURGY AND SPIRITUAL LIFE MINISTRIES</b>  | <b>FAITH FORMATION AND SPIRITUAL GROWTH MINISTRIES</b> | <b>PARISH LIFE AND OUTREACH MINISTRIES</b>              | <b>ST. RAPHAEL CATHOLIC SCHOOL MINISTRIES</b> |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |             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| <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Adult Choir</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Cantors</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Children’s Choir</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Praise Band</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Altar Servers for Adults</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Altar Servers for Youth</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Extraordinary Minister of Holy Communion (EMHC) at Mass</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>EMHC for Nursing Home</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>EMHC for Homebound</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Greeters</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Lectors at Weekend Masses</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Lectors at Weekday Masses</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Liturgy Committee</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Sacristan / Altar Care</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Ushers – 4:30pm Saturday</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Ushers – 8:00am Sunday</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Ushers – 9:30am Sunday</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Ushers – 11:30am Sunday</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Ushers – 5:30pm Sunday</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Wedding Coordinator</td></tr> </table> | <b>H</b>   | <b>S</b>  |   | <input type="checkbox"/> | <input type="checkbox"/> | Adult Choir | <input type="checkbox"/> | <input type="checkbox"/> | Cantors | <input type="checkbox"/> | <input type="checkbox"/> | Children’s Choir | <input type="checkbox"/> | <input type="checkbox"/> | Praise Band | <input type="checkbox"/> | <input type="checkbox"/> | Altar Servers for Adults | <input type="checkbox"/> | <input type="checkbox"/> | Altar Servers for Youth | <input type="checkbox"/> | <input type="checkbox"/> | Extraordinary Minister of Holy Communion (EMHC) at Mass | <input type="checkbox"/> | <input type="checkbox"/> | EMHC for Nursing Home | <input type="checkbox"/> | <input type="checkbox"/> | EMHC for Homebound | <input type="checkbox"/> | <input type="checkbox"/> | Greeters | <input type="checkbox"/> | <input type="checkbox"/> | Lectors at Weekend Masses | <input type="checkbox"/> | <input type="checkbox"/> | Lectors at Weekday Masses | <input type="checkbox"/> | <input type="checkbox"/> | Liturgy Committee | <input type="checkbox"/> | <input type="checkbox"/> | Sacristan / Altar Care | <input type="checkbox"/> | <input type="checkbox"/> | Ushers – 4:30pm Saturday | <input type="checkbox"/> | <input type="checkbox"/> | Ushers – 8:00am Sunday | <input type="checkbox"/> | <input type="checkbox"/> | Ushers – 9:30am Sunday | <input type="checkbox"/> | <input type="checkbox"/> | Ushers – 11:30am Sunday | <input type="checkbox"/> | <input type="checkbox"/> | Ushers – 5:30pm Sunday | <input type="checkbox"/> | <input type="checkbox"/> | Wedding Coordinator | <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Adult Religious Education</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Baptism Preparation</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Bible Study (Morning Session)</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Bible Study (Evening Session)</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Children’s Liturgy of the Word</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Confirmation Preparation</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Faith Formation Catechist / CCD Teacher / Assistant</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Family Enrichment Programs</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Marriage Preparation</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Religious Education</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Rite of Christian Initiation of Adults (RCIA)</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Rite of Christian Initiation of Children (RCIC)</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Vacation Bible School</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Youth Ministry for Grades 6 – 8</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Youth Ministry for Grades 9 – 12</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Youth Ministry Core Team</td></tr> </table> | <b>H</b> | <b>S</b> |  | <input type="checkbox"/> | <input type="checkbox"/> | Adult Religious Education | <input type="checkbox"/> | <input type="checkbox"/> | Baptism Preparation | <input type="checkbox"/> | <input type="checkbox"/> | Bible Study (Morning Session) | <input type="checkbox"/> | <input type="checkbox"/> | Bible Study (Evening Session) | <input type="checkbox"/> | <input type="checkbox"/> | Children’s Liturgy of the Word | <input type="checkbox"/> | <input type="checkbox"/> | Confirmation Preparation | <input type="checkbox"/> | <input type="checkbox"/> | Faith Formation Catechist / CCD Teacher / Assistant | <input type="checkbox"/> | <input type="checkbox"/> | Family Enrichment Programs | <input type="checkbox"/> | <input type="checkbox"/> | Marriage Preparation | <input type="checkbox"/> | <input type="checkbox"/> | Religious Education | <input type="checkbox"/> | <input type="checkbox"/> | Rite of Christian Initiation of Adults (RCIA) | <input type="checkbox"/> | <input type="checkbox"/> | Rite of Christian Initiation of Children (RCIC) | <input type="checkbox"/> | <input type="checkbox"/> | Vacation Bible School | <input type="checkbox"/> | <input type="checkbox"/> | Youth Ministry for Grades 6 – 8 | <input type="checkbox"/> | <input type="checkbox"/> | Youth Ministry for Grades 9 – 12 | <input type="checkbox"/> | <input type="checkbox"/> | Youth Ministry Core Team | <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Bereavement Ministry</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Blood Drives</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Boy Scouts</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Coffee and Donuts</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Council of Catholic Women</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Finance Committee</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Gift Shop</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Girl Scouts</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Holy Hoovers</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Knights of Columbus</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Mail Outs / Bulletin Inserts</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Money Counters</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Mustard Seed Ministry</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Parish Office Volunteer</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Receptions</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Respect Life</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Rosary Makers</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>St. Vincent de Paul</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Tuesday Social Club</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Visit Shore Acres Nursing Home</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Welcome Committee</td></tr> </table> | <b>H</b> | <b>S</b> |  | <input type="checkbox"/> | <input type="checkbox"/> | Bereavement Ministry | <input type="checkbox"/> | <input type="checkbox"/> | Blood Drives | <input type="checkbox"/> | <input type="checkbox"/> | Boy Scouts | <input type="checkbox"/> | <input type="checkbox"/> | Coffee and Donuts | <input type="checkbox"/> | <input type="checkbox"/> | Council of Catholic Women | <input type="checkbox"/> | <input type="checkbox"/> | Finance Committee | <input type="checkbox"/> | <input type="checkbox"/> | Gift Shop | <input type="checkbox"/> | <input type="checkbox"/> | Girl Scouts | <input type="checkbox"/> | <input type="checkbox"/> | Holy Hoovers | <input type="checkbox"/> | <input type="checkbox"/> | Knights of Columbus | <input type="checkbox"/> | <input type="checkbox"/> | Mail Outs / Bulletin Inserts | <input type="checkbox"/> | <input type="checkbox"/> | Money Counters | <input type="checkbox"/> | <input type="checkbox"/> | Mustard Seed Ministry | <input type="checkbox"/> | <input type="checkbox"/> | Parish Office Volunteer | <input type="checkbox"/> | <input type="checkbox"/> | Receptions | <input type="checkbox"/> | <input type="checkbox"/> | Respect Life | <input type="checkbox"/> | <input type="checkbox"/> | Rosary Makers | <input type="checkbox"/> | <input type="checkbox"/> | St. Vincent de Paul | <input type="checkbox"/> | <input type="checkbox"/> | Tuesday Social Club | <input type="checkbox"/> | <input type="checkbox"/> | Visit Shore Acres Nursing Home | <input type="checkbox"/> | <input type="checkbox"/> | Welcome Committee | <table border="0"> <tr><td><b>H</b></td><td><b>S</b></td><td></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>School Advisory Committee</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Auction</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Festival</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Band Boosters</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Cafeteria</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Home &amp; School Association</td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td><td>Library</td></tr> </table> <p style="text-align: center;"><b>CHILDRENS MINISTRY INTEREST</b></p> <p><b>Write Child’s name or initials next to interest:</b></p> <table border="0" style="width: 100%;"> <tr><td>Altar Server</td><td>_____</td></tr> <tr><td>Children’s Choir</td><td>_____</td></tr> <tr><td>Youth Praise Band</td><td>_____</td></tr> <tr><td>Boy Scouts</td><td>_____</td></tr> <tr><td>Girl Scouts</td><td>_____</td></tr> <tr><td>Sacraments or RCIC</td><td>_____</td></tr> <tr><td>Middle School Youth</td><td>_____</td></tr> <tr><td>High School Youth</td><td>_____</td></tr> </table> | <b>H</b> | <b>S</b> |  | <input type="checkbox"/> | <input type="checkbox"/> | School Advisory Committee | <input type="checkbox"/> | <input type="checkbox"/> | Auction | <input type="checkbox"/> | <input type="checkbox"/> | Festival | <input type="checkbox"/> | <input type="checkbox"/> | Band Boosters | <input type="checkbox"/> | <input type="checkbox"/> | Cafeteria | <input type="checkbox"/> | <input type="checkbox"/> | Home & School Association | <input type="checkbox"/> | <input type="checkbox"/> | Library | Altar Server | _____ | Children’s Choir | _____ | Youth Praise Band | _____ | Boy Scouts | _____ | Girl Scouts | _____ | Sacraments or RCIC | _____ | Middle School Youth | _____ | High School Youth | _____ |
| <b>H</b>  | <b>S</b>   |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                   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| <input type="checkbox"/>  | <input type="checkbox"/>                               | Adult Choir   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                     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| <input type="checkbox"/>  | <input type="checkbox"/>                               | Cantors   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                         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| <input type="checkbox"/>  | <input type="checkbox"/>                               | Children’s Choir  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                 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| <input type="checkbox"/>  | <input type="checkbox"/>                               | Praise Band   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                     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| <input type="checkbox"/>  | <input type="checkbox"/>                               | Altar Servers for Adults                                |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Altar Servers for Youth                                 |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Extraordinary Minister of Holy Communion (EMHC) at Mass |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | EMHC for Nursing Home                                   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | EMHC for Homebound                                      |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Greeters  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                         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                 |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Lectors at Weekend Masses                               |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Lectors at Weekday Masses                               |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Liturgy Committee                                       |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Sacristan / Altar Care                                  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Ushers – 4:30pm Saturday                                |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Ushers – 8:00am Sunday                                  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Ushers – 9:30am Sunday                                  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Ushers – 11:30am Sunday                                 |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                          |                          |                        |                          |                          |                          |                          |                          |                        |                          |                          |                        |                          |                          |                         |                          |                          |                        |                          |                          |                     |  |          |          |  |                          |                          |                           |                          |                          |                     |                          |                          |                               |                          |                          |                           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|                      |                          |                          |              |                          |                          |            |                          |                          |                   |                          |                          |                           |                          |                          |                   |                          |                          |           |                          |                          |             |                          |                          |              |                          |                          |                     |                          |                          |                              |                          |                          |                |                          |                          |                       |                          |                          |                         |                  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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Ushers – 5:30pm Sunday                                  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Wedding Coordinator                                     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <b>H</b>  | <b>S</b>   |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                   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      |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Adult Religious Education                               |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Baptism Preparation                                     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Bible Study (Morning Session)                           |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Bible Study (Evening Session)                           |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Children’s Liturgy of the Word                          |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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        |                          |            |                          |                          |              |                          |                          |               |                          |                          |                     |                          |                          |                     |                          |                          |                                |                          |                          |                   |   |          |          |  |                          |                          |                           |                          |                          |         |                          |                          |          |                          |                          |               |                          |                          |           |                          |                          |                           |                          |                          |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Confirmation Preparation                                |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Faith Formation Catechist / CCD Teacher / Assistant     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Family Enrichment Programs                              |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Marriage Preparation                                    |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Religious Education                                     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Rite of Christian Initiation of Adults (RCIA)           |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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|                      |                          |                          |              |                          |                          |            |                          |                          |                   |                          |                          |                           |                          |                          |                   |                          |                          |           |                          |                          |             |                          |                          |              |                          |                          |                     |                          |                          |                              |                          |                          |                |                          |                          |                       |                          |                          |                         |                  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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Rite of Christian Initiation of Children (RCIC)         |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Vacation Bible School                                   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Youth Ministry for Grades 6 – 8                         |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Youth Ministry for Grades 9 – 12                        |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Youth Ministry Core Team                                |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <b>H</b>  | <b>S</b>   |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                   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      |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Bereavement Ministry                                    |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Blood Drives  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                     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  |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Boy Scouts  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                       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|                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Coffee and Donuts                                       |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Council of Catholic Women                               |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Finance Committee                                       |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Gift Shop   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                       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|                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Girl Scouts   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                     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  |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Holy Hoovers  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                     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  |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Knights of Columbus                                     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Mail Outs / Bulletin Inserts                            |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Money Counters  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                   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    |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Mustard Seed Ministry                                   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Parish Office Volunteer                                 |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Receptions  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                       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|                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Respect Life  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                     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  |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Rosary Makers   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                   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    |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | St. Vincent de Paul                                     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Tuesday Social Club                                     |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Visit Shore Acres Nursing Home                          |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Welcome Committee                                       |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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| <b>H</b>  | <b>S</b>   |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                   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      |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | School Advisory Committee                               |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Auction   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                         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                 |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Festival  |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                         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                 |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Band Boosters   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                   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    |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Cafeteria   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                       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|                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Home & School Association                               |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |       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           |         |              |       |                  |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| <input type="checkbox"/>  | <input type="checkbox"/>                               | Library   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                         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                 |       |                   |       |            |       |             |       |                    |       |                     |       |                   |       |
| Altar Server  | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                   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      |             |       |                    |       |                     |       |                   |       |
| Children’s Choir  | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |               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  |       |             |       |                    |       |                     |       |                   |       |
| Youth Praise Band   | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |             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    |       |             |       |                    |       |                     |       |                   |       |
| Boy Scouts  | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                     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    |             |       |                    |       |                     |       |                   |       |
| Girl Scouts   | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |                   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      |             |       |                    |       |                     |       |                   |       |
| Sacraments or RCIC  | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |             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    |       |             |       |                    |       |                     |       |                   |       |
| Middle School Youth   | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |           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      |       |             |       |                    |       |                     |       |                   |       |
| High School Youth   | _____  |   |   |                          |                          |             |                          |                          |         |                          |                          |                  |                          |                          |             |                          |                          |                          |                          |                          |                         |                          |                          |   |                          |                          |                       |                          |                          |                    |                          |                          |          |                          |                          |                           |                          |                          |                           |                          |                          |                   |             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    |       |             |       |                    |       |                     |       |                   |       |

**WHICH MASS DOES YOUR FAMILY ATTEND OR WILL LIKELY ATTEND?**  Sat 4:30pm  Sun 8am  Sun 9:30am  Sun 11:30am  Sun 5:30pm

**ADDITIONAL COMMENTS:** \_\_\_\_\_

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