

ALTAR SERVER FAMILY REGISTRATION FORM
St. Patrick's Parish

Name of server	School	Grade in Fall 2016
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Please check **ALL** masses which your server(s) **MAY ATTEND** (year-round), if scheduled.

Saturdays, 5:00 p.m. Sundays, 7:30 a.m. 9:00 a.m. 10:30 a.m. 6:00 p.m.

Name of Parent(s)

Address	City	Zip	Home Phone	Optional Numbers
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E-Mail Address(es) - Please print or type clearly

If you have more than one child who are altar servers, do you want them scheduled (please choose **one**):

always to serve together can serve separately **or** together never serving together

Additional Child's name _____

Return of this form constitutes application for enrollment in the altar server training program. It also grants permission for the following: 1) server's name and home phone to be included on a master phone list (not published); 2) server's first name and last initial only to be posted on the St. Patrick's parish website, altar server's schedule; 3) email address to be entered into the software that creates the altar server's schedule. Email address provided will be used to communicate with the altar server's family.

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