

PLEASE RETURN TO
THE CHURCH OFFICE
OR SACRISTY BY
SUNDAY, MAY 10

Name _____

Extraordinary Minister of Holy Communion & Lector Availability Sheet

Phone _____

E-Mail _____

JUNE 2009

S	M	T	W	T	F	S
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

JULY 2009

S	M	T	W	T	F	S
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

AUGUST 2009

S	M	T	W	T	F	S
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

Please "X" the days you are not available.

Information:

- **Preferred Mass** (circle one)
 - 5 pm Saturday
 - 7 am
 - 8:30 am
 - 10 am
 - 11:30 am
- **Other Mass times I am willing to serve** (circle as many as you wish)
 - 5 pm Saturday
 - 7 am
 - 8:30 am
 - 10 am
 - 11:30 am
- **Special Scheduling** (circle if you wish this to apply)
 - Do not schedule me at the same Mass as my spouse.
- **Please do not schedule me this quarter.** ___ Yes
- **I would like to be trained as a Service Minister.** ___ Yes



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