

St. John the Baptist Parish

SERVER REGISTRATION FORM GRADES 5-8

PARENT AGREEMENT

Date: _____

Server's
Name: _____

Phone #: _____

Email _____

Address: _____

(City)

(Zip Code)

Birthdate: _____ School/Grade: _____
(month day year)

Father's Name: _____

Mother's Name: _____

We, the parent(s) of _____, give permission
(child's name)

for our child to be an altar server at St. John the Baptist Parish. In doing so, we understand our obligation to provide transportation to/from all Masses that they are scheduled to serve. We agree to make sure that our child will find a substitute server in the event that they are unable to serve at their scheduled Mass. We will make sure that our child is faithful in discharging all duties of the server and will do the best we can to support him/her in this ministry.

Signature of Parent(s):

*** Please check which Mass you prefer your child to serve:**

Saturday @4:00pm

Sunday @9:30am

No preference

Parents: Please have your child return this form to their formation teacher by **Wednesday, October 1**. Altar server training for all servers (new and current) is scheduled for Oct 1st during formation class. **After server training is completed, your child will be scheduled for the 2014/2015 year.**