



St. Bonaventure Parish Volunteer Registration Form

Name: _____

Date: _____

Address: _____

Telephone: _____

Email: _____

*Thank you for your interest in volunteering.
Please check opportunities that you would like to hear more about.*

- | | |
|--|--|
| <input type="checkbox"/> Teaching or Assisting with Religious Education | <input type="checkbox"/> Health Care Ministry |
| <input type="checkbox"/> Craft Assistant | <input type="checkbox"/> Bereavement Ministry |
| <input type="checkbox"/> Eucharistic Minister Daily Mass | <input type="checkbox"/> Prayer Shawl Ministry |
| <input type="checkbox"/> Eucharistic Minister Weekend Mass | <input type="checkbox"/> Knights of Columbus |
| <input type="checkbox"/> Eucharistic Minister Homebound | <input type="checkbox"/> Gardening Club |
| <input type="checkbox"/> Eucharistic Minister Hospital/Nursing Home | <input type="checkbox"/> Fund for the Needy - Food Pantry |
| <input type="checkbox"/> Lector | <input type="checkbox"/> Fund for the Needy - Food Delivery Days |
| <input type="checkbox"/> Choir | <input type="checkbox"/> Fund for the Needy - Golf Tournament |
| <input type="checkbox"/> Usher/Greeter at Weekend Mass | <input type="checkbox"/> Fund for the Needy - Christmas Wish Program |
| <input type="checkbox"/> Sunday Hospitality | <input type="checkbox"/> Maintenance Assistance |
| <input type="checkbox"/> Adult Funeral Altar Server | <input type="checkbox"/> Office Assistance |
| <input type="checkbox"/> Funeral Repast/Reception Hospitality | <input type="checkbox"/> Wedding Coordinator |
| <input type="checkbox"/> Linens - Liturgical | <input type="checkbox"/> Baptism Preparation for Parents |
| <input type="checkbox"/> Church flower watering - Christmas & Easter Seasons | <input type="checkbox"/> Santa's Gingerbread House Party |
| <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | <input type="checkbox"/> |

For office use only:

CORI Form Completed: Yes No If yes, date CORI Form completed: _____

Virtus Training Completed: Yes No If yes, date of Virtus Training: _____

Location of Virtus Training: _____

Diane _____

Update Volunteer List _____