



Divine Mercy Catholic Church

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Ministry Application Form

Last Name:	First Name:	Phone:
Address:		Email:
I would like to join the following: <input type="checkbox"/> Extraordinary Ministers of the Eucharist <input type="checkbox"/> Altar Society <input type="checkbox"/> Wedding Coordinators <input type="checkbox"/> Homebound Ministry <input type="checkbox"/> Greeters/Ushers <input type="checkbox"/> Pro-Life Movement <input type="checkbox"/> Music Ministry <input type="checkbox"/> Vocation Ministry <input type="checkbox"/> Altar Servers <input type="checkbox"/> Knights of Columbus <input type="checkbox"/> Lectors <input type="checkbox"/> DM Charismatic Group <input type="checkbox"/> Divine Mercy Devotion <input type="checkbox"/> The Lord's Flock <input type="checkbox"/> Sacred Heart Devotion <input type="checkbox"/> Couples for Christ <input type="checkbox"/> Guadalupe Committee <input type="checkbox"/> CommTech Ministry <input type="checkbox"/> Other _____ <input type="checkbox"/> Fundraising Committee		Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Separated <input type="checkbox"/> Divorced & Remarried <input type="checkbox"/> Divorced but Single <input type="checkbox"/> Married in Church <input type="checkbox"/> Married but not in Church
Are you a Baptized Catholic?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you received First Holy Communion?		<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you received the Sacrament of Confirmation?		<input type="checkbox"/> Yes <input type="checkbox"/> No

To be a member of a Church Ministry, you need to be a full member and practicing Catholic in good standing. If you are a single person, divorced or separated you must be faithfully living within the Church's teachings, i.e. (not in a cohabitating relationship or married outside the Catholic Church) and if you are married or re-married, your marriage must be recognized as valid in the eyes of the Catholic Church.

If there are any impediments to your call to service, please take the necessary steps to remove and resolve these impediments so you can once again be in full communion with the Catholic Church.

We appreciate your willingness to serve in the Parish of the Divine Mercy.

By signing below I certify that I have answered this application form honestly to the best of my knowledge.

Signature:	Date:
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