

ALTAR SERVER REGISTRATION FORM

(PLEASE PRINT CLEARLY)

Name of Server _____

Address of Server: _____

Home Phone Number: _____

Cell Phone Number: Mother: _____ Father: _____

Names of Siblings: _____

Parents Email Address _____

St. John School Student: Yes No (Circle one) CCD: Yes No Grade: _____

List all allergies of child to become Altar Server: _____

Signature of Server: _____

Parents Signatures permitting child to become an Altar Server

I/We, the parent (s) of _____

hereby give our permission for our child to become an Altar Serve for St. John the Evangelist Parish and promise to abide by all the rules and regulations for Altar Servers for St. John the Evangelist Parish and promise to ensure that our child will abide by all the rules and regulations for Altar Servers for St. John the Evangelist Parish.

Parent(s) Signature(s)
