



St. Anthony Parish

Oakley, CA

Registration Form Lay Ministry 2016

Name: _____

Address : _____

Tel: _____

Email address: _____

Sacraments received:

Baptism: _____ Confirmation: _____

First Communion: _____ Religious Marriage: _____

Single: _____ Widow/Widower: _____

Ministry you want to serve:

Extraordinary Minister of Holy Communion: _____

Lector: _____ Coordinator of Mass: _____

Mass you attend:

Saturday 5:00 pm ____ Sunday 8:00 AM ____ Sunday 10:00 AM ____