

ALTAR SERVER PERMISSION SLIP

Must be completed by parent and Altar Server

Altar Server's Name: _____
Last First M.I.

Address: _____
Street City Zip

Altar Server's Home Phone Number: _____

School Attended: _____ **Grade:** _____

Email Address: _____

I, _____ wish to serve in the Ministry of Altar Server at St. Rose of Lima Parish. I understand by signing this form that I am committed to doing my very best in this most important ministry. I agree to attend all required training sessions and workshops for Altar Servers. I also agree that regular participation in Mass is very important for this ministry. I agree to arrive promptly, dress properly, and serve reverently when I am assigned to serve.

Altar Server's Signature Date

PARENT COMMITMENT FORM

As parent/guardian of _____, I understand that he/she has requested to serve in the Ministry of Altar Server. I also understand that his/her ability to fulfill the commitments associated with this ministry depends heavily on my support. I agree to take responsibility that he/she is able to serve on the assigned dates and times. I also agree that continued growth and formation in the Catholic Faith is essential to my child's effectiveness in this ministry.

Parent's/Guardians Signature Date

Please return this completed form to the next Altar Server Workshop