



**St. John's, Albion & St. Cornelius, Silver Creek
Gathering in faith since 1834**

**Mailing Address: 16066 Gore Rd., Caledon, ON., L7C 3E6
Parish Office: 905-880-0080 Rectory: 905-880-3785**

Altar Server Application Form

Year Starting _____

Name: _____
(given) (middle) (surname)

Address: _____
(street) (city) (postal code)

Phone no.: home: _____ **work:** _____

Father's full name: _____ **Telephone** _____

Mother's full name: _____ **Telephone** _____

E-Mail Address: _____

Have you been baptized? ___ **Reconciliation** ___ **1st Holy Communion** ___ **Confirmation** ___

Emergency Contact Person: _____

Phone Number: _____

2nd Contact Person: _____

Phone Number: _____

Which Mass Are You Available To Serve At:

(Please put a check mark beside the ones you are available for)

Saturday, 5:00pm _____ **St. John's**

Sunday, 7:45am _____ **St. Cornelius**

Sunday, 9:00am _____ **St. John's**

Sunday, 10:15am _____ **St. John's**

Sunday, 11:45am _____ **St. John's**



Thank you for volunteering to serve at the Lord's Table. God bless you!