

# **Areas of Ministry Where You Could Make a Difference:** ***Expression of Interest Form***

- |   |   |
|---|---|
| <input type="checkbox"/> Adoration of the Blessed Sacrament       | <input type="checkbox"/> Lay-Led Liturgy in the Absence of a priest |
| <input type="checkbox"/> Altar Servers' Support                   | <input type="checkbox"/> Liturgy                                    |
| <input type="checkbox"/> Altar Society including Flower Arranging | <input type="checkbox"/> Minister of the Word                       |
| <input type="checkbox"/> Baptism Team                             | <input type="checkbox"/> Minister of Holy Communion                 |
| <input type="checkbox"/> Bethany Bereavement Support              | <input type="checkbox"/> Music in our churches                      |
| <input type="checkbox"/> Catechist                                | <input type="checkbox"/> Newsletter & Communications                |
| <input type="checkbox"/> Church Choir                             | <input type="checkbox"/> Parish Office Volunteer                    |
| <input type="checkbox"/> Church Cleaning                          | <input type="checkbox"/> Parish Pastoral Council                    |
| <input type="checkbox"/> Collector                                | <input type="checkbox"/> Parish Pilgrimages                         |
| <input type="checkbox"/> Eco-Team                                 | <input type="checkbox"/> Parish Website                             |
| <input type="checkbox"/> Family Mass Team                         | <input type="checkbox"/> Rosary Group                               |
| <input type="checkbox"/> Finance                                  | <input type="checkbox"/> Sacristan                                  |
| <input type="checkbox"/> Funeral Team                             | <input type="checkbox"/> Society of St Vincent de Paul              |
| <input type="checkbox"/> Justice and Peace                        | <input type="checkbox"/> Spiritual Support of the Sick & Housebound |
| <input type="checkbox"/> Other (Please specify)_____              |   |

## **Contact Details:**

Name\_\_\_\_\_

Address\_\_\_\_\_

Phone Number\_\_\_\_\_

Email\_\_\_\_\_