

*Saint Philip's Church  
Greenville, Rhode Island*

***ALTAR SERVER REGISTRATION FORM***

**LAST Name:** \_\_\_\_\_

**First Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_

**PLEASE NOTE:** Email will be the primary means of communication, especially for scheduling purposes. Please provide an email address that we may contact you at, it may be either the altar server's personal address or a parent's email.

**Email:** \_\_\_\_\_  
*(Please print clearly)*

**Mass preferences:**

Please indicate the Masses at which you would like to serve and number them accordingly by order of preference. (ex. 1,2,3)

**4:00 PM** \_\_\_      **7:30 AM** \_\_\_      **9:00 AM** \_\_\_

**10:30 AM** \_\_\_      **12 NOON** \_\_\_      **6:00 PM** \_\_\_

**Weddings:**

Please indicate if you are available to serve Weddings, they are typically held on Friday evenings, and Saturday and Sunday afternoons.

**Yes**       **No**

***PLEASE RETURN THIS FORM TO THE SACRISTY OR THE  
RECTORY OFFICE.***

***THANK YOU FOR YOUR WILLINGNESS TO SERVE!***

