

ST. ELIZABETH ANN SETON CATHOLIC CHURCH

1401 Coral Ridge Drive • Coral Springs, Florida 33071-5420
Telephone 954-345-7071 • Fax 954-753-8442 • setonre@aol.com

Peer Minister Application Form 2017-2018

PLEASE PRINT ALL INFORMATION

Name: _____ (Last) _____ (First) M.I. _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Parent's Phone: _____

School Attending: _____ Your 2017-2018 school grade: _____

Date of Birth: ____/____/____ Email: _____ @ _____

Have you been confirmed? ____ Yes ____ No Do you regularly attend Sunday Mass? ____ Yes ____ No

List any extra-curricular activities that you are involved in at your school: _____

Do you drive? ____ Yes ____ No If no, do you have transportation available? ____ Yes ____ No

Why do you want to be a peer minister? _____

Which day/time would you like to aide in? Indicate a 1st, 2nd and 3rd choice.

_____ Sunday 12:45pm - 2:00pm (Kindergarten thru Confirmation 2)

_____ Monday 4:00pm - 5:15pm (Kindergarten thru 5th Grade)

_____ Monday 7:00pm - 8:15pm (6th Grade, Confirmation 1 & Confirmation 2)

_____ Tuesday 4:45pm - 6:00pm (1st Grade thru 5th grade)

_____ Tuesday 7:00pm - 8:15pm (6th grade, Confirmation 1 & Confirmation 2)

What grade would you like to aide in? Indicate a 1st, 2nd and 3rd choice:

1st choice: _____ 2nd choice: _____ 3rd choice: _____

"Forget yourself to others and others will not forget you."

Thank you for your interest in serving God by serving the needs of His children.

I understand that if I am chosen to be a peer minister I will be expected to live my faith by: attending **all** classes, attending Mass weekly, attending required retreats and any other planning meetings as directed.

Photography Release:

Throughout the year photographs are taken in the Religious Education program, your permission is requested to use your child's photograph for parish publications and distributions.

_____ I hereby grant to St. Elizabeth Ann Seton parish the right to use my child's photographic likeness in print for parish publications and distribution.

Student Signature

Date

Parent Signature

Date

Complete and return to the Religious Education office. Email: setonre@aol.com. Fax: 954-753-8442. Peer Ministers are selected over the summer. Students who are selected as peer ministers will be notified by mail prior to the start of classes in September.

For Office Use Only:

'17-'18 School grade: _____ Session placed in: _____ Grade: _____ Teacher: _____ Date received: _____