

## Saint Justin Martyr Catholic Church & Misión del Sagrado Corazón

## **Extraordinary Minister of Holy Communion Discernment Form**

Today's date:				
Full Name:				
Address:				
City: St	ate:	Zip:		
Home phone:	Cell phone:			
Email:				
Marital Status (select one)  Single	e Married	Divorced	Widowed	
Are you registered member of St. Justin Martyr Parish?  Yes  No				
Envelope/Registration #				
Are you baptized in the Roman Cat	tholic Church?	Yes	□ No	
Have you received the sacrament of	Confirmation?	Yes	☐ No	
If married, are you married in the O Name of spouse:		Yes	□ No	
Is your spouse an Extraordinary Minister of Holy or Lector at St. Justin Martyr?  Yes No				
Are you living with someone without being married?  Yes No				
Are you age 25 or older?  Yes No				
Are you interested in becoming Extraordinary Minister of Holy Communion to the sick?  Yes No				
If interested in being EMS, have you been fingerprinted & Safe Environment trained?   Yes No				

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## **Mass Availability**

Which masses are you available to serve at? Please list your availability by ranking the order of preference (Ex. Highest preference is 1 to lowest number).

Monday 6:30 am	
Monday 8:30 am	
Tuesday 6:30 am	
Tuesday 8:30 am	
Wednesday 6:30 am	
Wednesday 8:30 am	
Thursday 6:30 am	
Thursday 8:30 am	
Friday 6:30 am	
Friday 8:30 am	
Saturday 8:30 am	

Saturday 5:30 pm	
Sunday 6:45 am	
Sunday 8:00 am	
Sunday 11:00 am	
Sunday 12:30 pm	
Sunday 5:30 pm	

Any other scheduling requests, such as frequency, scheduling with someone else etc. mark below:

Scheduler: Amalia Onofre • 714-774-2595 x 102 • aonofre@saintjustin.org