



Diocese of Hamilton

Volunteer Information Form

Parish/ Division: _____ Date _____

Name _____ E-Mail Address: _____

Phone (Res) _____

Address _____ Postal Code _____

May we contact you at work? _____ Telephone (Bus.): _____

Baptismal Information: CATHOLIC _____ CHRISTIAN _____ NOT BAPTIZED _____

Have you received FIRST COMMUNION? _____ Have you received CONFIRMATION? _____

If you are new to the Parish, what was your previous Parish? _____

Number of years at current address: _____

If less than six months, please provide your previous address: _____

If you are a current volunteer with a parish or division of the Diocese of Hamilton, Please indicate the ministries in which you have served, and the dates _____

If you are a new volunteer, in what volunteer position or positions are you interested?

Why?

What times do you have available for volunteering?

Weekly _____ Monthly _____ Occasionally _____

Daytime _____ Evening _____ Weekend _____

Please provide details of any other volunteer experiences: _____
