

ST. MARY'S PARISH
TIME AND TALENT COMMITMENT

Name _____ Today's Date _____

Address _____

Phone _____ E-mail _____

Directions: Please fill out one form per person. Check off all the choices that interest you. For the ministries in which you are currently serving, write (N) for now serving. Once completed, this information will be put into our database and as the need arises for a certain ministry, volunteers will be called upon to help. Remember, you may say "no" if the time is not right for you. A brief description of each ministry can be found on our web site at www.stmarysoneonta.org. If you have questions please call the rectory at 432-3920.

Christian Service:

- | | |
|----------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Food Pantry | <input type="checkbox"/> Thanksgiving Dinner |
| <input type="checkbox"/> Giving Tree | <input type="checkbox"/> Nursing Home Visitor |
| <input type="checkbox"/> Homebound Visitor | <input type="checkbox"/> Christmas Dinner |
| <input type="checkbox"/> Hospital Visitor | <input type="checkbox"/> Sewing/ Embroidery |
| <input type="checkbox"/> Saturday's Bread (soup kitchen) | |

Committees and Organizations:

- | | |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Peace & Justice | <input type="checkbox"/> Rosary Society |
| <input type="checkbox"/> Knights of Columbus | <input type="checkbox"/> Buildings & Grounds |
| <input type="checkbox"/> Hospitality (baking, casseroles, desserts, set-up, clean-up, etc.) | |
| <input type="checkbox"/> Holy Sews (<i>see website</i>) | <input type="checkbox"/> Bereavement Hospitality Committee |

Faith Formation:

- ___ Children's Programs (Pre-K to Grade 6)**
___ Catechist (teacher) ___ Classroom aide ___ Substitute
- ___ Youth Ministry**
___ Catechist ___ Substitute ___ Help with Retreats
- ___ Adult Education Programs**
- ___ Sacramental Prep**
___ Baptism ___ 1st Communion ___ Confirmation ___ RCIA

(Please see other side)

Liturgical Ministries:

___ Eucharistic Minister

___ 5:00pm ___ 10:30am ___ Nursing Homes/Hospital ___ Homebound

___ Greeter

___ 5:00pm ___ 10:30am

___ Lector (Reader)

___ 5:00pm ___ 10:30am

___ Usher

___ 5:00pm ___ 10:30am

___ Sacristan

___ 5:00pm ___ 10:30am

___ Funeral Liturgies

___ Adult Altar Server

___ Choir

___ Eucharistic Minister

___ Lector

___ **Choir/Music Ministry** (if you play an instrument, please specify which one)

Needs Network:

___ I am willing to receive **3-4 e-mails per month** alerting me about easy-to-acquire items (i.e. laundry soap, unused furniture) and easy-to-complete acts of service (i.e. a ride to a local doctor's appointment), which can meet an immediate need in our Oneonta community. I understand that I would be part of a large network of volunteers and in no way required to personally meet any or all of the needs.

Give an hour:

___ I cannot commit to a specific ministry, but would be willing to donate an hour or two of my time. Please call me as the need arises.

*Take this opportunity to transform yourself
from being a member to being an **owner** of our Parish!*

Thank you for your response and for supporting this effort.