

St. Elizabeth Ann Seton Children’s Ministry
3100 W. Spring Creek Pkwy Plano, TX 75023

Grade ____ Day ____ Time ____ Room ____ For coordinator use only

2018-2019 Teen Volunteer for Faith Formation

Print and mail or drop by our office, or you can save this form to your computer, complete and save the form, then e-mail the form to the grade level coordinator’s address below as an attachment.

Today’s Date: _____

Name: _____

Last Name, First Name, Middle Initial, Nickname

Street Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Age: _____ Current Grade: _____ Confirmed _____

Emergency contact name and number: _____

Medical Conditions: _____

Community Service Hours for: _____

Please list your skills and talents: _____

Please indicate the areas where you would like to serve: You will be contacted about your placement and receive a Teen Policy and Procedures handout.

(Please check and number rate your choices: 1 as first choice, 2 as second choice, 3 as third choice):

____ Sunday 8:30AM:	PreK-3	PreK-4	K	1 st	2 nd	3 rd	4 th	5 th	Special Friend*
____ Sunday 10:15 AM:	PreK-3	PreK-4	K	1 st	2 nd	3 rd	4 th	5 th	Special Friend*
____ Wednesday 4:30PM:	PreK-3	PreK-4	K	1 st	2 nd	3 rd	4 th	5 th	Special Friend*
____ Wednesday 6:00PM:	PreK-3	PreK-4	K	1 st	2 nd	3 rd *	4 th	5 th	Special Friend*

*Special Friends assist children with special needs during sessions.

____ Other volunteer opportunities (please list what your interests are)

Thank you for volunteering your time to serve the Parish. Please contact us if you have any questions.

Blessings,

Children’s Ministry Staff

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