

Altar Server Registration Form

Name:

Age:	Grade in S	School:	
Parent or Guardian Name	3:		
Address:			
Email:	Phone:		
		(circle Yes or	No)
I am a Christ the Ki	ng School Student:	Yes	No
	ıs Education Student:	Yes	No
I am a CTK Youth M	linistry Student:	Yes	No
None of the Above:		Yes	No
I am a returning CT	TK Altar Server:	Yes	No
Altar Servers should be available to serve a minimum of one weekend mass each month. In addition, CTK Students will serve at the Friday 8:00am School Mass. My weekend mass preference is: (circle your preference)			
Sunday 9:00am S	Sunday 10:30am	Other:	
Parent Signature:		Date:	