



OUR LADY OF THE LAKES  
CATHOLIC CHURCH  
VOLUNTEER INTENT FORM

YEAR: \_\_\_\_\_

RETURNING	NOT RETURNING
-----------	---------------

**If you are returning, please fill below**

Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Address: \_\_\_\_\_

Volunteer Signature	Date
---------------------	------

**OFFICE USE ONLY**

Ethnicity: _____	SSlast4# _____
------------------	----------------

*Please check below:*

- |  |                                    |
|--|------------------------------------|
| <i><b>Wednesday Afternoon</b></i>      | <i>( ) Coordinator</i>             |
| <i><b>Wednesday Evening</b></i>        | <i>( ) Catechist</i>               |
| <i><b>Wednesday Evening-Adults</b></i> | <i>( ) Catechist's Assistant</i>   |
| <i><b>Saturday Morning</b></i>         | <i>( ) Special Educ. Catechist</i> |
| <i><b>Saturday Morning-Adults</b></i>  | <i>( ) Special Educ. Assistant</i> |
| <i><b>Sunday Morning</b></i>           | <i>( ) RCIA Catechist</i>          |
| <i><b>Sunday Morning –Adults</b></i>   | <i>( ) Sponsor</i>                 |

Interview by: _____
---------------------