

Stewardship Commitment Form

LAST NAME (PRINT CLEARLY): _____

Address: _____

Preferred Phone Number: _____

Email Address: _____

- ☐ Yes, my household is interested in sharing our Stewardship gifts!
- ☐ Someone in my household is interested in becoming a **new** volunteer
~ Choose areas of Ministry Below; put first name of volunteer on line
- ☐ Someone in my household would like to re-commit to **current** ministries
~ Notate current ministries below; put first name of volunteer on line

FIRST NAME (Write on lines below)

Family Member #1: _____

Family Member #2: _____

Family Member #3: _____

Family Member #4: _____

Family Member #5: _____

Family Member #6: _____

Prayer

- _____ Adoration of the Blessed Sacrament
- _____ Weekend Lector
- _____ Weekend Eucharistic Minister
- _____ Weekend Altar Server
- _____ Weekday Lector
- _____ Weekday Altar Server
- _____ Eucharist to the Homebound
- _____ Cantor
- _____ Accompanist
- _____ Instrumentalist
- _____ Choir
- _____ Prayer Tree
- _____ Rosary and/or Communion to Assisted Living Facilities

Hospitality

- _____ New Parishioners Dinner
- _____ Special Events Dinners
- _____ Hospitality Usher
- _____ Hospitality Greeter
- _____ Funeral Usher/Hospitality Minister
- _____ Funeral Luncheons
- _____ Homebound Visitation
- _____ Nursing Home Visitation

Formation

- _____ Classroom Aide
- _____ Catechist
- _____ Hall Monitor
- _____ Middle School Mentor
- _____ Children's Liturgy of the Word Leader
- _____ Youth Ministry Team Member
- _____ Vacation Bible School Leader
- _____ FOCCUS Facilitator Couple

Service

- _____ Food Pantry
- _____ Meals on Wheels
- _____ Prayer Blanket Ministry
- _____ Environment Committee
- _____ Knights of Columbus
- _____ SMCHS Carnival Worker
- _____ Church Cleaning
- _____ Kitchen Help
- _____ Parish Events Photographer
- _____ Media & Technology Assistance
- _____ Office Help



Please return this
form to
Corpus Christi
1919 N. 2nd St
Bismarck, ND 58501

Other

I have an idea for a new ministry! _____