THE CATHEDRAL OF ST. THOMAS MORE
3901 CATHEDRAL LANE • ARLINGTON, VIRGINIA • 22203

ALTAR SERVER INFORMATION FORM

GENERAL INFORMATION

Name: _____
First Middle Last

Date of Birth: _____ Age: _____ Grade:_____

School: _____

CONTACT INFORMATION

Parents'/Guardians' Names: _____

Home Address: _____

_____

Home Phone: _____ Cell/Mobile: _____

Email: _____ Secondary Email: _____

OTHER INFORMATION

Have you been Baptized? ☐ Yes ☐ No

Have you received First Communion? ☐ Yes ☐ No

If you do not attend Catholic School, are you enrolled in CCD? ☐ Yes ☐ No

SERVICE AVAILABILITY

Please indicate when your son would be available to serve Mass at the Cathedral of St. Thomas More:

Sundays (includes Saturday evening Vigil Mass): ☐ Yes ☐ No

Weekdays (M-F) during the School Year: ☐ 7:00 AM ☐ 12:05 PM ☐ Special Masses (Funerals/Evenings)

Weekdays (M-F) during the Summer: ☐ 7:00 AM ☐ 12:05 PM ☐ Special Masses (Funerals/Evenings)

Saturdays (9:00 AM Mass, Weddings, and Funerals): ☐ Yes ☐ No

_____ _____
Parent / Guardian Signature Date