

HOLY FAMILY CHURCH
VOLUNTEER APPLICATION – COMMISSION SUBCOMMITTEES

Dear Parishioner,

Thank you for answering the call for Commission subcommittee volunteers. Your willingness to be considered as a lay leader is evidence of a giving heart and a helping hand. We will respond to you shortly.

Gardner Barker, Chair
Pastoral Council

Libby Vracin, Vice-Chair
Pastoral Council

Ann Flynn, Chair
Pastoral Leadership Subcommittee

Directions: Please return to the Pastoral Center, Pastoral Council mailbox, or fax to (626) 799-0423. For questions, please e-mail: pastoralcouncil@holyfamily.org or call (626) 403-6183.

Name: _____

Address: _____

Phone: _____ **E-Mail:** _____

Occupational Experiences: _____

Special Skills/Interests: _____

Volunteer Experiences: _____

Any other information you wish to share: _____

Please indicate below which areas you feel match your skills/knowledge/experience:

- | | | |
|---|---|---|
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Marketing Strategist | <input type="checkbox"/> Advertising |
| <input type="checkbox"/> Copy Writer | <input type="checkbox"/> Editing/Proofreading | <input type="checkbox"/> Grant Writer |
| <input type="checkbox"/> Brochure Design | <input type="checkbox"/> Adobe Publisher | <input type="checkbox"/> Microsoft Front Page |
| <input type="checkbox"/> Website Design | <input type="checkbox"/> Microsoft Publisher | <input type="checkbox"/> Printer |
| <input type="checkbox"/> Technical Writer | <input type="checkbox"/> Program Evaluation | <input type="checkbox"/> Event Planner |
| <input type="checkbox"/> Promotion | <input type="checkbox"/> Database Analysis | |

Date Completed: ___/___/___

Date Received: ___/___/___ **Application forwarded on** ___/___/___ **to:**

Worship Education/Formation Community Life Outreach Administration

Discernment contact on ___/___/___ **with** _____

Outcome: _____