

DIOCESE OF CHARLESTON

LECTOR  
APPLICATION (rev. 6/26/2017)

PARISH: ST. MARY HELP OF CHRISTIANS CATHOLIC CHURCH, AIKEN, SC

FULL NAME: \_\_\_\_\_

FULL ADDRESS: \_\_\_\_\_

TELEPHONE: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

PREFER MASS: SAT 5:00 \_\_\_\_ SUN 8:30 \_\_\_\_ 11:00 \_\_\_\_ 12:30(Sp)OSM \_\_\_\_ 5:00 \_\_\_\_

SACRAMENTS -- IN FULL COMMUNION WITH THE CATHOLIC CHURCH:

BAPTISM: YEAR: \_\_\_\_\_ CHURCH: \_\_\_\_\_

CONFIRMATION: YEAR: \_\_\_\_\_ CHURCH: \_\_\_\_\_

MARRIAGE: YEAR: \_\_\_\_\_ CHURCH: \_\_\_\_\_

SINGLE  MARRIED  DIVORCED  WIDOWED  REMARRIED

SPOUSE'S FULL NAME & RELIGION \_\_\_\_\_

WHERE MARRIED  CATHOLIC  PROTESTANT  OTHER  CIVIL

WITH CATHOLIC CHURCH PERMISSION  YES  NO

FIRST MARRIAGE FOR YOU  YES  NO - DEATH \_\_\_\_\_ DIVORCE \_\_\_\_\_

FIRST MARRIAGE FOR SPOUSE  YES  NO - DEATH \_\_\_\_\_ DIVORCE \_\_\_\_\_

IF EITHER ONE EITHER DIVORCED & REMARRIED, STATUS OF ANNULMENTS

DATE SUBMITTED: \_\_\_\_\_ ACCEPTED BY: \_\_\_\_\_ PASTOR