**2022-23 Parish Liturgical Ministries Update**

# Office of Worship, Diocese of St. Petersburg

*Please return this completed survey* ***by August 31, 2022:***

**Fax it**: **Email it: Mail to**: Office Worship

727-374-0208 DJR@dosp.org P.O. Box 40200

 St. Petersburg, FL 33743

one form per parish please

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**Language:** [ ]  English [ ]  Spanish [ ]  Other:

**Parish Name:**

**Pastor:**

**Preferred Email:**

**Parochial Vicar:**

**Preferred Email:**

**Deacon(s) & Email(s):**

**Parish Mailing Address:**

**City:**       **State:**       **Zip:**

**Phone Number:**

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**Parish Secretary/**

**Administrative Assistant:**

**Email:**

**Phone Number:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Sacristan:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

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**Liturgy Commission**

**Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

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**RCIA**

**Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

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**Readers**

**English Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Spanish Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

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**Extraordinary Ministers of Holy Communion**

*(Those who serve at Mass)*

**English Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Extraordinary Ministers of Holy Communion** *(Cont.)*

*(Those who serve at Mass)*

**Spanish Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Eucharistic Ministers to the Sick & Homebound/Pastoral Care**

**English Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Spanish Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Other Coordinator:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

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**Music Ministry**

**Director:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other Music Ensembles** (English & Spanish)

**Contact Person:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other Music Ensembles** (English & Spanish) *Cont.*

**Contact Person:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Contact Person:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other:

**Contact Person:**

**Email:**

**Preferred Mailing Address:** [ ]  Parish [ ]  Other: