



PARISH STEWARDSHIP OF TIME



FAMILY NAME _____

ADDRESS _____

PHONE (_____) _____ EMAIL _____

Making a commitment to pray, to worship, to spend time with my family and community is my way of saying thanks to God for all the gifts He has given to me.

MY SPIRITUAL LIFE

- Mass attendance _____
- Personal daily prayer time _____
- Pray the Rosary _____
- Weekly Scripture reading _____
- Other _____

NAME

MY FAMILY

- Quality family time _____
- Family meal time _____
- Other _____

NAME

MY COMMUNITY

- Assisting those in need _____
- Help in a school _____
- Other _____

NAME



PARISH STEWARDSHIP OF TALENT



FAMILY NAME _____

ADDRESS _____

PHONE (_____) _____ EMAIL _____

OPPORTUNITIES FOR PARISH INVOLVEMENT

Please indicate name of family member next to each ministry.

I want to
be involved

I'm already
involved

NAME

- | | | | |
|--------------------------|---------------------------------|--------------------------|-------|
| <input type="checkbox"/> | Altar Server _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Bereavement Ministry _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Catechist/Faith Formation _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Choir _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | DDD Committee _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Eucharistic Minister _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Hospitality Committee _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Knights of Columbus _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Ladies Guild _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Lector _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Marriage and Family Life _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | RCIA Sponsor/team _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Stewardship Council _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Vocation Committee _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Young Adult Ministry _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Youth Ministry _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | _____ | <input type="checkbox"/> | _____ |



PARISH STEWARDSHIP OF TREASURE



FAMILY NAME _____

ADDRESS _____

PHONE (_____) _____ EMAIL _____

MY/OUR GIFT OF TREASURE FOR THE COMING YEAR WILL BE:

\$ _____ per week | OR \$ _____ per month | OR \$ _____ per year

Each year we ask you to prayerfully evaluate and plan your gift of treasure to your parish or mission.
This chart is a guideline for deciding your gift.

Weekly gift to my parish by % of yearly household income.

*Each year we ask you to prayerfully evaluate and plan your gift of treasure to your parish or mission.
This chart is a guideline for deciding your gift.*

Yearly	2%	3%	4%	5%
\$ 10,000	\$ 4	\$ 6	\$ 8	\$ 10
20,000	8	12	15	19
30,000	12	17	23	29
40,000	15	23	31	38
50,000	19	29	38	48
60,000	23	35	46	58
70,000	27	40	54	67
80,000	31	46	62	77
90,000	35	52	69	87
100,000	38	58	77	96
110,000	42	63	85	106
120,000	46	69	92	115
130,000	50	75	100	125
140,000	54	81	108	135