APOSTOLIC VICARIATE OF SOUTHERN ARABIA YOUNG ADULT MINISTRY TERMS AND CONDITIONS

VOLUNTEER FORM FOR JUBILEE OF YOUTH (JOY) 2025. ROME ITALY

VOLUNTEER DETAILS (PARISH MINISTRY) VOLUNTEER'S NAME: PARISH: Are you serving as a volunteer in your parish: Yes /No? (The below needs to be signed by your parish volunteer's coordinator) I, am serving as coordinator for the _____ ministry in since_____ I hereby inform that _____ is a practicing Catholic and dedicated and committed member of our ministry and is regularly offering his / her service as per the schedule. Name of the parish volunteer's coordinator: Signature: Name of Parish Priest: Signature of Parish Priest: Stamp of Parish:

Date:

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VOLUNTEER DETAILS (PARISH YOUTH GROUP) VOLUNTEER'S NAME: PARISH: Are you an active member of any parish youth and young adult group: Yes /No? (The below needs to be signed by your parish youth group or YAM coordinator) I, am serving as coordinator for the _____ youth group I hereby inform that is an active member of our youth group since_____ and is a practicing Catholic and dedicated and committed member of our youth group and is regularly offering his / her service as per the schedule Name of the parish youth group or YAM coordinator:_____ Signature: Name of Parish Priest: Signature of Parish Priest:

Stamp of Parish:

Date: