



CALIFORNIA STATE COUNCIL Liturgy Survey

Name: _____

Title/Position: _____

Phone: _____

Email Address: _____

Check any/all areas in which you have been formally trained and would be willing to assist at the Masses held at the DD meetings or state convention:

Eucharistic Minister

Sacristan

Lector

List any foreign language spoken _____

Cantor

Choir

Instrumental Music

Please note any comments or clarification of the information above:
