



Archdiocese of Regina

SCREENING COMMITTEE MEMBER UPDATE FORM

Please Print

Parish: _____

Parish Address: _____

Date: _____

Pastor: _____

Pastor's Signature: _____

Remove Committee Member

Name: _____

Effective Date: _____

Is this committee member being replaced? Yes _____ No _____

(If yes, please fill out the "Add Committee Member" portion of this form)

Reason for removal of Committee Member:

Add Committee Member

Name: _____

Address: _____

Home Phone: (____) ____-____ Cell Phone: (____) ____-____

e-mail : _____

Is this person the new Coordinator for the committee? Yes _____ No _____

Is this new Committee Member replacing a current Committee Member? Yes _____ No _____

(If yes, please fill out the "Remove Committee Member" portion of this form)

Effective Date: _____

Change of Contact Information for Current Committee Member

Name: _____

Address: _____

Home Phone: (____) ____-____ Cell Phone: (____) ____-____

e-mail: _____

Effective Date: _____

Please mail a copy or fax this form to:

Volunteer Screening Program
Archdiocese of Regina
445 Broad Street N.
Regina, SK
S4R 2X8

Fax: 306-352-6313