Information Consent Form for Permanent/Scheduled Adorers

I	hereby give permission for X
I parish to share my personal information, spe other Parishioners/Adorers who cannot attend to replace them so that Monstrance is not left u	their holy hour and are looking for someone
Your consent to share personal information is entirely volume. Should you have any questions about this process, or when the work of the state of the should be should	vish to withdraw your consent please contact: X from
Name:	
Phone number(s) best to reached at: Home:	Cell:
Time and Day chosen to Adore Jesus:	
Date:	
I	hereby give permission for X
parish to share my personal information, spe other Parishioners/Adorers who cannot attend to replace them so that Jesus exposed in the Mo	their holy hour and are looking for someone
Your consent to share personal information is entirely vol Should you have any questions about this process, or w Monday to Friday 9 a.m. to 4:30 p.m. at PHONE NUMBE	vish to withdraw your consent please contact: X from
Name:	
Phone number(s) best to reached at: Home:	Cell:
Time and Day chosen to Adore Jesus:	

Information Consent Form for Substitutes - Casual Adorers

I	hereby give permission for X
- • • • • • • • • • • • • • • • • • • •	pecifically my name and phone number only, with
other Parishioners Adorers who cannot att	end and require someone to replace them so that
Jesus exposed in the Monstrance is not left	unattended.
Vorm consent to show more and information is outinal	versal suntanno and versa many suith durant versann a annount at anno time
•	y voluntary and you may withdraw your consent at any time or wish to withdraw your consent please contact: X from
Monday to Friday 9 a.m. to 4:30 p.m. at PHONE NUI	
Name:	
rame.	
Phone number/s best to be reached at: Home:	Cell:
Date:	
Marning (6 a m. to 12 Naan)	Afternoon (12 Noon to 6 n m)
Morning (6 a.m. to 12 Noon)	Afternoon (12 Noon to 6.p.m.)
Evening (6 p.m. to 12 Midnight)	Early Morning (12 Midnight to 6 a.m.)
I	hereby give nermission for X
parish to share my personal information sr	hereby give permission for X pecifically my name and phone number only, with
	end and require someone to replace them so that
the Monstrance is not left unattended.	•
± .	y voluntary and you may withdraw your consent at any time. or wish to withdraw your consent please contact: X from
Monday to Friday 9 a.m. to 4:30 p.m. at PHONE NUI	
Name	
Name:	
Phone number/s best to be reached at: Home:	Cell:
Date:	
Morning (6 a.m. to 12 Noon)	Afternoon (12 Noon to 6.p.m.)
Morning (o a.m. to 12 Noon)	
Evening (6 n m. to 12 Midnight)	Early Morning (12 Midnight to 6 a m.)