

Meal Ministry Contact Sheet

Name of Rectory Staff Member:
Caller's Name:
Caller's Relationship to Recipient?
Recipient's Name:
Address:

Email:
Reason meals are needed:

Date of Call to Rectory:
Phone Number:

Home Phone:
Cell Phone:
Work Phone:
Best Time to Call?

Does the Recipient have family in town?
Does the Recipient know St. Dominic has been contacted?

Other Comments:

Meal Ministry Contact Person: _____ Date of 1st Call to Recipient: _____
Number of People in Household: _____ Adults _____ Children
Special Dietary Concerns: _____
Best Days/Times for Delivery: _____
Other Comments: _____

Date Information Given to Elinor Danford & Rita Gregg _____

Date of Follow Up with Recipient: _____

- Verify meals delivered
- "Can St. Dominic provide you with any other support at this time?"
- Would you like a member of the parish staff to contact you?

Date of Call to Rectory (if requested): _____