

RCIA REGISTRATION 2018-2019

PLEASE PRINT ALL INFORMATION

A. PARTICIPANT'S INFORMATION

Full Name: _____ Name you go by: _____

Place of birth: _____ Date of birth: _____
City State

Have you been baptized? YES NO If yes, what Church? _____

Date of Baptism: _____ Place of Baptism: _____
City State

Father's Full Name: _____

Mother's full maiden name: _____

Current address: _____

Home phone: _____ Cell: _____

Email: _____

I am: _____ Interested in becoming Catholic
_____ Curious about the Catholic faith but undecided
_____ Catholic wishing to receive the sacrament of Confirmation
_____ Other: _____

B. MARITAL INFORMATION

I am present: _____ single(never married) _____ engaged _____ married _____ widowed
_____ divorced _____ separated

If married, is this your first marriage? YES NO Is it your spouse's first marriage? YES NO

Is your spouse Catholic? YES NO If yes, was wedding in a Catholic Church? YES NO

Spouse's name: _____

If you or your spouse id Catholic and married previously, was an annulment received? YES NO

If engaged, is future spouse Catholic? YES NO Has future spouse been married before? YES NO

TO BE COMPLETED BY RCIA TEAM

Sponsor: _____ Confirmation Name: _____

Applied for Grant to Confirm: _____ Grant received: _____

Annulment Needed: NO YES For Candidate____ Spouse____ (Formal____ Documentary____)