

**Rite of Christian Initiation of Adults (RCIA)**

**\* Adult Registration Form \***

*Information on this form is held in confidence and is not shared without your permission.*

Today's Date: \_\_\_\_\_

**I. CONTACT INFORMATION**

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_ E-mail: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**II. SACRAMENTAL INFORMATION**

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Biological Father's First & Last Name: \_\_\_\_\_

Biological Mother's First & Last Name: \_\_\_\_\_

Biological Mother's Maiden Last Name: \_\_\_\_\_

1. What is your present religious affiliation (if any)? \_\_\_\_\_

2. Have you ever been baptized? Please circle one.                      Yes                      No                      Not Sure

*If yes, please provide the following information, and obtain a copy of your baptismal certificate:*

a. In what denomination were you baptized? \_\_\_\_\_

b. Date or approximate age when you were baptized: \_\_\_\_\_

c. Baptismal name (if different from current name): \_\_\_\_\_

d. Place of Baptism

\* Name of Church: \_\_\_\_\_

\* Denomination of Church: \_\_\_\_\_

\* Full Address, if known: \_\_\_\_\_

\* Or General Location, if known (town, state, region, and/or country): \_\_\_\_\_

e. If you were baptized Catholic, please circle the sacraments that you have already received:

Reconciliation

Eucharist

**III. MARITAL STATUS**

1. Are you living with your significant other but not married to him/her?                      Yes                      No

2. Are you engaged to be married? Please circle one.                      Yes                      No

a. Your fiancé(e)'s name: \_\_\_\_\_

b. Your fiancé (e)'s current religious affiliation (if any): \_\_\_\_\_

c. For YOU, is this your first marriage?                      Yes                      No

d. For YOUR FIANCE(e), is this their first marriage?                      Yes                      No

3. Are you currently married? Please circle one.                      Yes                      No

a. If yes, how many times have you been married? Please include all civil & religious ceremonies. \_\_\_\_\_

b. Your current spouse's name: \_\_\_\_\_

b. Your current spouse's current religious affiliation (if any): \_\_\_\_\_

c. For YOU, is this your first marriage?                      Yes                      No

d. For YOUR CURRENT SPOUSE, is this the first marriage?                      Yes                      No

e. Date of Marriage: \_\_\_\_\_

f. Place of Marriage (Name of Church & Denomination): \_\_\_\_\_

g. Officiating Authority of Marriage: \_\_\_\_\_

(priest, Christian minister, non-Christian minister, civil government)

**III. MARITAL STATUS (Continued)**

- |  |     |    |
|--|-----|----|
| 4. Are you currently married but separated from your spouse? | Yes | No |
| a. Are you divorced from your spouse?                        | Yes | No |
| b. If divorced & remarried, have you received an annulment?  | Yes | No |
| 5. Are you a widow(er)?                                      | Yes | No |

**IV. GENERAL QUESTIONS**

1. What or who has led you to want to know more about the Catholic faith?
  
2. Please describe the types of religious education that you have received, as a child and as an adult.
  
3. What contact have you had with the Catholic Church up until now?
  
4. What are some of the questions or concerns that you have about the Catholic Church?
  
5. Currently, which of the following statements best describes your present feelings and thoughts about the possibility of joining the Catholic Church? Please circle one:
  - a. I need much more information about the Catholic Church before I would consider joining.
  - b. I am considering joining, but I am still unsure about it.
  - c. I am fairly sure that I would like to join, but I still need some time to study & pray about it.
  - d. I am fairly sure that I want to join the Catholic Church.

**V. FAMILY INFORMATION**

**Rite of Christian Initiation of Children (RCIC)**

1. Do you have children? Yes                      No
  
2. If yes, please list their information:
  - a. First & Last Name: \_\_\_\_\_ Age: \_\_\_\_\_  
    Relationship: (daughter, step-son, etc.) \_\_\_\_\_ 2017-2018 School Grade: \_\_\_\_\_
  - b. First & Last Name: \_\_\_\_\_ Age: \_\_\_\_\_  
    Relationship: (daughter, step-son, etc.) \_\_\_\_\_ 2017-2018 School Grade: \_\_\_\_\_
  - c. First & Last Name: \_\_\_\_\_ Age: \_\_\_\_\_  
    Relationship: (daughter, step-son, etc.) \_\_\_\_\_ 2017-2018 School Grade: \_\_\_\_\_
  - d. First & Last Name: \_\_\_\_\_ Age: \_\_\_\_\_  
    Relationship: (daughter, step-son, etc.) \_\_\_\_\_ 2017-2018 School Grade: \_\_\_\_\_
  - e. First & Last Name: \_\_\_\_\_ Age: \_\_\_\_\_  
    Relationship: (daughter, step-son, etc.) \_\_\_\_\_ 2017-2018 School Grade: \_\_\_\_\_