



R.C.I.A. Information Form

Information is held in confidence and is not shared without permission.

LEGAL NAME: _____

First Name

Middle Name

(Maiden Name)

Last Name

Date of Birth: _____ **Place of Birth** (*City/State/Province/Country*) _____

Your Father: _____

First Name

Middle Name

Last Name

Religion

Your Mother: _____

First Name

Middle Name

Maiden Name

Religion

CONTACT INFORMATION

MailingAddress: _____

Street

City

State

Zip Code

Home #: _____ **Cell:** _____ **Email:** _____

RELIGIOUS HISTORY

What, if any, is your present religious affiliation? _____

Have *you* ever been baptized? Yes No I am not sure. *If you are baptized, please answer all the following questions:*

Date of Baptism: _____ **Religion/Denomination:** _____

Baptism Church Name: _____

Baptism Church Address: _____

Street

City

State

Zip Code

If *you* were baptized **Catholic**, check those sacraments you have already received:

Penance (*Confession*)

Eucharist (*First Communion*)

Confirmation

CURRENT MARITAL STATUS

Note: If you, your fiancé, or your spouse has/have any prior marriages in any type of marriage ceremony, please be sure to check the appropriate box.

I am single and have never been married.

I am engaged to be married.

Fiancé(e) Name: _____ **Religion (if any):** _____

YOU: my first marriage I was married before **FIANCE(E):** his/her first marriage was married before

I am married.

Spouse Name: _____ **Religion (if any):** _____

YOU: my first marriage I was married before **SPOUSE:** his/her first marriage he/she was married before

Date of Marriage: _____ **Place of Marriage:** _____

I am married, but separated from my spouse.

I am divorced and I have not remarried.

I am a widow/widower.

SPONSOR INFORMATION

Do you have a sponsor? Yes No **Sponsor's Name:** _____

Is your sponsor a member of St. Rita Parish? Yes No *If not, please provide a Sponsor's Certificate from their church*