

Church of the HCJ/SBJL
RCIA Application

Name _____

Address _____

City _____ State _____ Zip _____

Phone numbers: home _____

work _____ cell _____

e-mail _____

What is the best way to reach you? ___Phone ___Text ___Email

Father's name _____

Mother's maiden name _____

Place of Birth _____

Sacraments:

Were you baptized in a Catholic Church? _____

If so, please give Church Name, City, State, Country:

Baptism Godparents Names _____

First Communion: Church, Date _____

Do you have Confirmation Sponsors in mind? _____

Marital status:

Are you single? _____

Are you married? _____

Were you ever married? _____

If so: in Church _____ in City Hall _____ other _____

To whom?

Was your spouse ever married? _____

Place of marriage / Name of Church: _____