

**INSTRUCTIONS:**

1. Fill out the registration form.
2. Call rectory to schedule appointment with the pastor or his delegate.
3. Bring form to appointment.

*\*The sponsor form can be filled out by your sponsor and signed by pastor then mailed to the rectory.*

*\*\*If you don't know your Confirmation name or sponsor yet, we can add that later to the main form*

**St. Rita Catholic Church**  
**PO Box 1449**  
**1400 E. Owens St**  
**Show Low AZ 85902**  
**(928) 537-2543**  
**stritashowlow@dioceseofgallup.org**

*For priest's use:*  
 Initial interview Date:  
 Priest:  
 Note:  
  
 Final Interview Date:  
 Priest:  
 Note:

## 2022-23 RCIA Registration Form

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

Name: (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_

Address: (Street) \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Telephone: (preferred) \_\_\_\_\_ (secondary) \_\_\_\_\_

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Date of Birth: (Month/Day/Year): \_\_\_\_\_ Place of Birth (City, State): \_\_\_\_\_

Names of Birth Parents/Guardians: \_\_\_\_\_

Mother's maiden Last Name (sacrament record-keeping): \_\_\_\_\_

CONFIRMATION SAINT NAME: \_\_\_\_\_

SPONSOR NAME: \_\_\_\_\_

Is your sponsor a parishioner at St. Rita's Catholic Church? Y/N \_\_\_\_

\*Sponsors must fill out the sponsor form and have their pastor sign and seal it. May be turned in by February 1.

\*\*We can add Confirmation name at a later date.

**SACRAMENTS**

Have you been baptized? ☩ YES \_\_\_\_ NO \_\_\_\_ If YES: Date of Baptism (MM/DD/YYYY) \_\_\_\_\_

If YES: Name of Church \_\_\_\_\_ Denomination \_\_\_\_\_

Address of Church of Baptism \_\_\_\_\_

(☩ Please submit a copy of your baptismal form as soon as possible, which can be retrieved from your church of baptism. We should have this by February 1.)

Have you previously received instruction in the CATHOLIC Faith or Sacrament preparation? Yes \_\_\_\_ No \_\_\_\_

If YES, when and where? \_\_\_\_\_

Present Religion or Denomination (if any): \_\_\_\_\_

Past Religions or Denominations: \_\_\_\_\_

**Have you received these sacraments?**

PENANCE (Confession/Reconciliation) Y / N (If YES, when & denomination/church) \_\_\_\_\_

EUCARIST (Holy Communion) Y / N ( If YES, when & denomination/church) \_\_\_\_\_

CONFIRMATION: Y / N (If YES, when & denomination/church) \_\_\_\_\_

**I will attend RCIA because:**

- \_\_\_ I am not Catholic but fully intend on entering the Catholic Church this coming Easter Vigil (April 8, 2023).
- \_\_\_ I want to learn more about the Catholic faith. (I am not certain I want to join the Catholic Church.)
- \_\_\_ I am Catholic but have not received Holy Communion and/or Confirmation.
- \_\_\_ I am Catholic but have been away from the Church and want to learn about my Catholic faith.

**REGULAR FAITH PRACTICE:**

- Do you attend Sunday Mass each week at a Catholic Church? Y / N
- Do you attend St. Rita’s Catholic Church regularly for Mass? Y / N
- Are you registered at St. Rita’s Catholic Church? Y / N
- Are you involved in other faith groups or activities? Y / N If so list: \_\_\_\_\_

**MARITAL STATUS:**

*(We want to help identify and resolve any possible obstacles to your becoming Catholic, if you so choose.)*

- Single \_\_\_ Engaged \_\_\_ Married \_\_\_ (Catholic marriage? Y / N )
- Cohabiting (Living outside of Marriage) \_\_\_ If so, any children through arrangement? Y \_\_\_ N \_\_\_
- Divorced \_\_\_ Annulled by Catholic Church \_\_\_ Petition for Annulment in Process \_\_\_ Remarried \_\_\_

**Your Current Marriage if married):** Date of Marriage (MM/DD/YY): \_\_\_\_\_ Name of Spouse \_\_\_\_\_

Where were you married? (Church/Venue, City, State, Country)? \_\_\_\_\_

Name of presiding minister or official: \_\_\_\_\_ Minister’s denomination or religion \_\_\_\_\_

Was your spouse baptized? Yes \_\_\_ No \_\_\_ If YES, as a Catholic? Yes \_\_\_ No \_\_\_ Other denomination or religion: \_\_\_\_\_

Was your spouse previously married? Yes \_\_\_ No \_\_\_

If so was each marriage annulled by the Catholic Church? Yes \_\_\_ No \_\_\_

Please list all previous marriages for you and your spouse below, even if currently not married.

**Your Previous Marriage/s (additional marriages on page 3)**

**Prior Marriage #1:** Name of Spouse \_\_\_\_\_ Date \_\_\_\_\_ Location of Wedding \_\_\_\_\_

Name of presiding minister or official \_\_\_\_\_ Presider’s denomination or religion (if applicable) \_\_\_\_\_

Was this former spouse baptized? Yes \_\_\_ No \_\_\_ If YES, as a Catholic? Yes \_\_\_ No \_\_\_ Other denomination or religion \_\_\_\_\_

Was this former spouse previously married? Yes \_\_\_ No \_\_\_ Was each marriage annulled by the Catholic Church? Yes \_\_\_ No \_\_\_

**Prior Marriage #2:** Name of Spouse \_\_\_\_\_ Date \_\_\_\_\_ Location of Wedding \_\_\_\_\_

Name of presiding minister or official \_\_\_\_\_ Presider’s denomination or religion (if applicable) \_\_\_\_\_

Was this former spouse baptized? Yes \_\_\_ No \_\_\_ If YES, as a Catholic? Yes \_\_\_ No \_\_\_ Other denomination or religion \_\_\_\_\_

Was this former spouse previously married? Yes \_\_\_ No \_\_\_ Was each marriage annulled by the Catholic Church? Yes \_\_\_ No \_\_\_

**Your Current Spouse’s Previous Marriage/s**

**Prior Marriage #1:** Name of Spouse \_\_\_\_\_ Date \_\_\_\_\_ Location of Wedding \_\_\_\_\_

Name of presiding minister or official \_\_\_\_\_ Presider’s denomination or religion (if applicable) \_\_\_\_\_

Was his/her former spouse baptized? Yes \_\_\_ No \_\_\_ If YES, as a Catholic? Yes \_\_\_ No \_\_\_ Other denomination or religion \_\_\_\_\_

Was his/her former spouse previously married? Yes \_\_\_ No \_\_\_ Was each marriage annulled by the Catholic Church? Yes \_\_\_ No \_\_\_

**Prior Marriage #2:** Name of Spouse \_\_\_\_\_ Date \_\_\_\_\_ Location of Wedding \_\_\_\_\_

Name of presiding minister or official \_\_\_\_\_ Presider’s denomination or religion (if applicable) \_\_\_\_\_

Was his/her former spouse baptized? Yes \_\_\_ No \_\_\_ If YES, as a Catholic? Yes \_\_\_ No \_\_\_ Other denomination or religion \_\_\_\_\_

Was his/her former spouse previously married? Yes \_\_\_ No \_\_\_ Was each marriage annulled by the Catholic Church? Yes \_\_\_ No \_\_\_

(If you have additional marriages please call the office at (928) 537-2543)

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**RCIA Sponsor Eligibility Form**

**PART I: Completed by the prospective SPONSOR**

In accepting the responsibility of being a Godparent for Baptism and/or a Sponsor at Confirmation, by signing below I truthfully state the following, in accordance with canonical guidelines:

- I am at least sixteen (16) years of age;
- I have received the Sacraments of Christian Initiation in the Catholic Church (Baptism, Holy Eucharist, and Confirmation);
- If married, I am married in the Catholic Church and intend to continue living in conformity with the laws of the Catholic Church regarding marriage;
- I attend Mass regularly on Sundays and Holy Days of Obligation, and receive the Sacraments of the Church (Holy Eucharist and Penance) regularly; and
- I understand and accept the responsibilities which I undertake at this time, and I promise to help the efforts of the Confirmation candidate named below to live fully in accord with the teachings of the Catholic Church, with my support, encouragement, and prayer.

Name of Catechumen/Candidate: (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Name of Sponsor (Printed) \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number(s) \_\_\_\_\_

Are you a parishioner of St. Rita’s Catholic Church, Show Low, AZ? YES \_\_\_ NO \_\_\_

(If YES, please return form to St. Rita’s OFFICE for the pastor’s verification)

\_\_\_\_\_  
Signature of Sponsor, in agreement to the requirements outlined above

**PART II. Completed and sealed/stamped by the Pastor/Parish of the Sponsor (or attach the sponsor’s parish’s sealed/stamped certificate of eligibility)**

I certify that the sponsor listed above is registered in our parish and according to our records is an active member of our parish and eligible to be a Confirmation sponsor.

\_\_\_\_\_  
Pastor’s signature (or his Authorized Delegate)

\_\_\_\_\_  
Date

<<PARISH SEAL>>

\_\_\_\_\_  
Parish, City, State