

RCIA Inquiry Enrollment Form

Date: _____

Full Legal Name: _____ Maiden Name: _____

Mailing Address: _____

Cell Phone: _____ Work Phone: _____

E-mail Address: _____

Date of Birth: _____ Place of Birth: _____

Have you been baptized? Yes No

What denomination?: _____ Church Name: _____

City: _____ Date: _____

(Please provide a current copy of Baptismal certificate with notations)

Spouse's Full Name (Including Maiden): _____ Faith: _____

Mother's Full Name (Including Maiden): _____ Faith: _____

Father's Full Name: _____ Faith: _____

Are you currently married? Yes No (if no, skip to question 4)

1. Were you married in a Catholic Church? Yes No

Date: _____

2. Has your marriage been blessed by a Catholic priest? Yes No

Date: _____

3. Do you or your spouse have a previous marriage that ended by divorce?

You: Yes No Spouse: Yes No

4. If yes, has that marriage been annulled?

You: Yes No Spouse: Yes No

5. Do you have children? Yes No

a. If yes, have they been baptized in the Catholic faith? Yes No

Please list children names & ages: _____

Why are you interested in becoming Catholic? _____

If you know this information, please fill it in; otherwise we will add it later.

Sponsor chosen: _____

Saint name chosen: _____