



ST. JOHN XXIII  
CATHOLIC CHURCH

Date \_\_\_\_\_

## **RCIA Registration Form- Participant**

### **Basic Information (please print neatly)**

Legal Name (first, middle, last): \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Name you go by: \_\_\_\_\_ Gender (Circle One) Male Female

Primary Phone Number: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Birth Location: \_\_\_\_\_

Father's Legal Name: \_\_\_\_\_

(first, middle, last)

Mother's Legal Name: \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

(first, middle, last)

### **Sacramental Information**

Have you already received:

Baptism?  No  Yes If "Yes", then was it:  Catholic?  Protestant? Date \_\_\_\_\_

Name of Church \_\_\_\_\_ City, State \_\_\_\_\_

First Communion?  No  Yes In which Catholic Church? \_\_\_\_\_

Confirmation?  No  Yes In Which Catholic Church? \_\_\_\_\_

### **Marital Information**

Are you married?  No  Yes Date: \_\_\_\_\_

Location: Catholic Church \_\_\_\_\_ Other: \_\_\_\_\_

Have you or your spouse ever been divorced?  No  Yes

If you are not married, are you living with someone?  No  Yes

If yes, what is the relationship? \_\_\_\_\_

### **Other**

Sponsor Name \_\_\_\_\_

Contact Sacraments@john23.com with questions or to submit this form