

ST. MARTIN DE PORRES CATHOLIC CHURCH
P.O Box 1062 Dripping Springs, TX 78620

RCIA REGISTRATION FORM

(Information on this form is held in confidence and is not shared without your permission)

Today's Date: _____
Name: First: _____ Middle: _____ Last: _____
Maiden Name (if applicable): _____
Occupation: _____
Date of Birth: _____ Age: _____
Place of Birth: City _____ State _____ Country _____
Name of Father: _____
Name of Mother: _____

I. Contact information

Full Mailing Address:

Home Phone: _____ Cell/Mobile Phone: _____
Email: _____

II. Religious history

1. What, if any, is your present religious' affiliation? _____

2. Have you ever been baptized? _____ Yes _____ No _____ I am not sure

If you answered "Yes" to Question 2, please provide the following information:

- (a) In what denomination were you baptized? _____
- (b) Date or your approximate age when you were baptized: _____
- (c) Baptismal name (if different from current name): _____
- (d) Place of Baptism (name of church/denomination): _____
- (e) Address, if known: _____
- (f) Location, if known: _____
(city, state, country)

3. If you were baptized as a Catholic, check those sacraments you have already received:
_____ Penance (confession) _____ Eucharist (First communion) _____ Confirmation

III Current Marital Status

(check ONE appropriate option below and provide the information for that option only.)

_____ I have never been married.

_____ I am engaged to be married ___in Catholic Church ___Other (Civil/Other Church)

(a)Your Fiancé(e)'s Name: _____

(b)Your Fiancé(e)'s Current Religious Affiliation (if any): _____

(c) For you:

a. _____This is my first marriage.

b. _____I have been married before. How many times? _____

(d) For your fiancé:

a. _____This is his/her first marriage.

b. _____ My fiancé has been married before. How many times? _____

_____ I am married ___In the Catholic Church ___Civilly ___Non-Catholic Church

a. Your Spouse's name _____

b. Your Spouse's current Religious Affiliation (if any) _____

c. For you:

_____ This is my first marriage.

_____I have been married before. How many times? _____

d. For your spouse:

_____ This is my spouse's first marriage.

_____ My spouse has been married before. How many times? _____

e. Date of Marriage: _____

f. Place of Marriage: _____

(church/court, city, state, country)

g. Officiating Authority of Marriage: _____

(civil government, non-Christian minister, Christian minister, Catholic Cleric)

_____ I am married (___in the Catholic Church ___Other), but separated from my spouse.

_____ I am civilly divorced, and I have not remarried.

_____ I am a widow/widower and have not remarried since my spouse's death.

IV Family information

List the name(s) of your spouse, any children).

<u>Name</u>	<u>Relationship</u>	<u>Age</u>	<u>Religion</u>

V. GENERAL QUESTIONS

1. What or who has led you to want to know more about the Catholic Faith?

2. Please describe the types of religious education you have received, as a child and as an adult.

3. What contact have you had with the Catholic Church to date?

4. What are some of the questions or concerns you have about the Catholic Church?

5. At this point in time, which of the following statements best describes your present feelings and thoughts about the possibility of joining the Catholic Church? (please check one)

_____ A. I need much more information about the Catholic Church before I would consider joining.

_____ B. I am considering joining, but I am still unsure about it.

_____ C. I am fairly sure that I would like to join, but I still need some time to study and pray about it.

_____ D. I am fairly sure that I want to join the Catholic Church.