

## R.C.I.A./ADULT CONFIRMATION ENROLLMENT FORM 2016-2017

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Occupation: \_\_\_\_\_ Place of Work: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

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

### EDUCATIONAL BACKGROUND:

High School: \_\_\_\_\_ College: \_\_\_\_\_

**HAVE YOU EVER BEEN BAPTIZED:** Yes  No

Name of Church: \_\_\_\_\_ Denomination: \_\_\_\_\_

Location: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_

Do you have a Certificate of Baptism or can you obtain one: Yes  No

**HAVE YOU EVER BEEN CONFIRMED:** Yes  No

Name of Church: \_\_\_\_\_ Denomination: \_\_\_\_\_

**HAVE YOU EVER RECEIVED COMMUNION:** Yes  No

Name of Church: \_\_\_\_\_ Denomination: \_\_\_\_\_

Location: \_\_\_\_\_ Date: \_\_\_\_\_

**HAVE YOU EVER BEEN ACCEPTED AS A CATECHUMEN OR CANDIDATE IN THE CATHOLIC CHURCH:** Yes  No

Name of Church: \_\_\_\_\_ Location: \_\_\_\_\_ Date: \_\_\_\_\_

**ARE YOU CURRENTLY MARRIED:** Yes  No

To whom are you currently married: \_\_\_\_\_ Religion of Spouse: \_\_\_\_\_

Place of Marriage: \_\_\_\_\_ Date of Marriage: \_\_\_\_\_

Prior to this marriage, have you ever been married to another person in a church, civilly, or in common law: Y N

PLEASE DO NOT WRITE BELOW THIS LINE!

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Name of Sponsor: \_\_\_\_\_

Saint's Name: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_

Confirming Prelate: \_\_\_\_\_