



Corpus Christi Catholic Church
The Rite of Christian Initiation of Adults (RCIA)
Registration/Information Form



Today's Date: _____

Full Legal Name: _____

(As you want it on your certificate).

(Maiden Name) _____

Name you like to be called: _____

Date of Birth: _____

Place of Birth: _____

Mailing Address: _____

City, State, Zip: _____

Place of Work: _____

Best number to reach you: _____ Cell: _____

Work: _____ Home: _____

Email address: _____

Father's Full Name: _____ Religion: _____

Mother's Full Name: _____ Religion: _____

(Mother's Maiden Name) _____

Have you ever been baptized? _____ Date of Baptism: _____

Location (What Church, City, State, Country) _____

*** If you have been baptized, please provide a copy of your baptismal certificate ***

Baptismal Certificate Received: _____

Marital Information

Please check one of the following; __Single __Married __Separated __Divorced __Remarried

Are you married now? _____

If you are married now:

is this your first/only marriage? _____

Full Name of Spouse: _____

Religion: _____

Has he/she been married before? _____

If so, how many times? _____

Date of Marriage: _____

Location (What city, state, country) _____

*** If you are married, please provide a copy of your marriage certificate. ***

Copy of Marriage Certificate received: _____

If you are not married now:

Have you been married previously? _____

If that was not your first marriage, how many times have you been married previously? _____

A Few “Getting to Know You” Questions (Optional)

What/who led you to take an interest in learning about the Catholic faith?

How much religious experience (belief in God, attendance at church or religious study groups, experience with family, etc.) have you had in your life?

What would you hope to learn from these sessions?

Do you have any questions you would like to have answered at this point?