

## RCIA Registration

Name: \_\_\_\_\_  
*First Middle Last (Maiden)*

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_

City and State of Birth: \_\_\_\_\_

Name of Mother: \_\_\_\_\_  
*First Middle (Maiden last name)*

Name of Father: \_\_\_\_\_  
*First Middle Last*

Has this the candidate been Baptized? YES or NO

**If yes:**

Date of Baptism: \_\_\_\_\_ Denomination: \_\_\_\_\_

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

Place of Baptismal Church: \_\_\_\_\_  
*City* *State*

Is the candidate currently married?      YES      or      NO

**If yes:**

Name of Spouse: \_\_\_\_\_  
*First* *Last Name (use maiden if applicable)*

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

Place of Marriage: \_\_\_\_\_  
*Name of Church*

\_\_\_\_\_  
*City and State of Marriage*

Has the candidate or their current spouse been previously married?      YES      or      NO

Who will be the Candidate's Godparent (only needed for Baptismal Candidates)?

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

Who will be the Candidate's Sponsor for Confirmation?

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