

Todays Date:_

CATHEDRAL OF THE BLESSED SACRAMENT RELIGIOUS EDUCATION PROGRAM

RCIA Registration Form

| Catechumen | | |
|---------------------|--|--|
| Catholic Candidate | | |
| Profession of Faith | | |
| For Office Use Only | | |

| Please enter today's date. | |
|----------------------------|--|
| Pertinent Information | |

| First Name: | Middle | Name: | Last Name: | | |
|---------------------------------------|-------------------------------|-----------------------|--|--|--|
| Please Check One: Adult Teen or Child | | | | | |
| Address: | | | | | |
| City: | | State: Z | ip: | | |
| Home/Cell Phone: (_ |) | Work/Other Phone | :() | | |
| | | Email Address: | | | |
| Date of Birth: | | Place of Birth: | | | |
| | | | Enter City, State or Country | | |
| Father's Name: | First: | Middle: | Last: | | |
| Father's Religion: | Catholic: | Other Religion: | the name of your Father's religion | | |
| | | List | the name of your rather stellgion | | |
| Mother's Name: | First: | Middle: | Maiden Name: | | |
| Mother's Religion: | Catholic | Other Religion: | | | |
| Have you been Bapti | zed Yes n | No Religious Denomina | ation: I.e. Catholic, Baptist,Luthern,Methodist | | |
| If yes when? | As an Infant | As a child/te | een As an Adult | | |
| Do you have a copy of | of your Baptismal Certificate | Yes I have a | a copy No, I don't | | |
| Other Sacraments Received | | | | | |
| First Communion: | Yes | ☐ No | ☐ I don't know | | |
| Confirmation: | Yes | ☐ No | ☐ I don't know | | |
| Reconcilliation: | Yes | ☐ No | ☐ I don't know | | |
| Matrimony: | Yes | ☐ No | ☐ I don't Know | | |

Complete Page Two on Reverse

Page Two Continued, complete all that apply.

| SECTION A – Marriage Infor | mation - <u>Please check all</u> | tnat apply | | | |
|--|---|--|---|--|--|
| ☐ I am not married and hav | ve never been married | ☐ I am currently engaged? | | | |
| I am single and living alo | | My fiancés Name: | | | |
| i am single and irring als | 1.63 1.65 | My fiancés religion: | | | |
| ☐ I am a Widow/Widower | | Has your fiancé ever been m | | | |
| If you have ever been m | narried please check all c | f the following that apply and co | mplete SECTION B below. | | |
| ☐ I am currently married | | I am divorced and have NO | 「remarried. | | |
| My spouses name: | | Was previous spouse Catho | | | |
| Is your spouse Catholic? | | Did he/she have a prior mar | | | |
| Did he/she have a prior r | | Are you planning on remarr | | | |
| ☐ I have been married mor | e than once. | My marriage is in the annul | ment process | | |
| I am presently separated | l. | ☐ I have received a Catholic ar | nnulment. (Provide Document) | | |
| I am divorced and have some source to large the large specific spe | nolic? | | | | |
| SECTION B | | | | | |
| My Current Marriage: (The one I'm in today) | Location of <u>current</u> man | Enter address, City and Country | | | |
| | | Enter the name of the person perfo | orming the ceremony and their title | | |
| | If a religious ceremony r | name of church denomination Enter the religion of the chu | rch i.e Baptist,Luthern or name of facility. | | |
| My 1 st marriage: | | | | | |
| | Enter address, City and Country Who Performed the ceremony? | | | | |
| | | Enter the name of the person perfo | orming the ceremony and their title | | |
| | If a religious ceremony r | name of church denomination Enter the religion of the chu | rch i.e Baptist, Luthern or name of facility. | | |
| My 2 nd Marriage: | Location of second marr | iage: | · · · · · · · · · · · · · · · · · · · | | |
| | Who Performed the cere | Enter address, City and Country emony? | | | |
| | | | orming the ceremony and their title | | |
| | If a religious ceremony r | name of church denomination | rch i.e Baptist,Luthern or name of facility. | | |
| My 2rd Marriago | Location of third marria | | remine Baptist, Lutherm of mame of facility. | | |
| My 3 rd Marriage | Location of third marria | Enter address, City and Country | | | |
| MI - D. Connect the connect 2 | | | | | |
| | Wno Performed the ceremony? | | | | |
| | If a religious ceremony r | name of church denomination | | | |
| | | Enter the religion of the chur | ch i.e Baptist,Luthern or name of facility. | | |
| Sister Lisa Marie EdCC | Cathody | al of the Blessed Sacrament | 916-444-5364 | | |

1017 11 Street Sacramento, CA 95814

Director of Education

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