

St. Peter's R.C.I.A. Registration Form

PO Box 12507, New Iberia, LA 70562-2507 (337) 369-3816

Contact Information:

First Name

Middle

Last

Mailing Address:

Home Phone:

Business Phone:

Cell Phone:

Religion: _____

Marital Status (Circle One): Married Single Widowed Divorced Separated

If married, were you married by a Priest? Yes No

If not, would you like to have your marriage validated (blessed)? _____

Previous Marriages? Yes No

If married previously, were you married by a Priest? Yes No Annulment? Yes No

Date of Birth: _____

City & State: _____

Father: _____

Mother (Include Maiden name): _____

Baptized? Yes No

If yes, what Church? _____

1st Communion? Yes No If yes, when? _____

If yes, what Church were you baptized? _____

What city were you baptized? _____ Age: _____

Of applicable, who is your sponsor for this course? _____

If you are a sponsor, who are you sponsoring? _____

When were you confirmed? _____ Where? _____

Name of your Church Parish: _____

Reason for Attending R.C.I.A.

Wish to become Catholic: Yes No

Sponsor: Yes No

Baptized Catholic, but need to receive 1st Communion and/or Confirmation: Yes No

Faith Enrichment: Yes No Other Reason (Please explain): _____

THE INFORMATION BELOW IS FOR THE UNBAPTIZED PERSON

An un-baptized person may have either a godmother or godfather, or both.

Upon celebration of the sacraments, the information is to be entered into the Baptismal and Confirmation Registers in the usual manner.

Godmother: _____ Parish: _____

Godmother's Address: _____ Phone: _____

Godfather: _____ Parish: _____

Godfather's Address: _____ Phone: _____

Dates of: Rite of Acceptance into Order of Catechumens: _____

Interview for Discernment for Admission to Election: _____

Rite of Election: _____

Celebration of the Sacraments of Initiation: _____

THE INFORMATION BELOW IS FOR ALREADY-BAPTIZED NON-CATHOLICS

Upon celebration of the sacraments, the information is to be entered into the Baptismal and Confirmation Registers in the usual manner.

Sponsor: _____ Parish: _____

Sponsor's Address: _____

Sponsor's Phone: _____

Date of Baptism: _____ Parish: _____

Godparents: _____

Officiant: _____

Dates of: Rite of Call to Continuing Conversion: _____

Reception into Full Communion of the Catholic Church: _____

Date: _____

Signature of Interviewer

Signature of Inquirer

Mark One: Candidate: _____ Catechumen: _____ Sponsor: _____ Other (Explain): _____

DOCUMENTS NEEDED: BAPTISMAL: _____ FIRST COMMUNION: _____ CONFIRMATION: _____

(CIRCLE ONE, THEN MARK WHEN RECEIVED)

NOTES: