

Rite of Christian Initiation of Adults (RCIA)/ Adult Confirmation

REGISTRATION FORM

St. Raymond of Peñafort Catholic Church, Springfield, VA

Date _____

Name: _____
 First Middle Last

Address: _____

Telephone: _____ (Home) _____ (Work) _____ (Cell)

Email: _____

Occupation: _____

Date of Birth: (MM/DD/YYYY): _____ Place of Birth (City, STATE): _____

Names of Birth Parents/Guardians: _____

Mother's maiden Last Name: _____

Have you ever received instruction in the Catholic faith or preparation for the sacraments before?

_____ YES _____ NO If so, when and where? _____

Present Religion/Denomination (if any): _____

Past Religions/ Denominations: _____

SACRAMENTS RECEIVED:

Baptism: _____ Yes _____ NO Date (MM/DD/YYYY): _____

Name and Denomination of Church: _____

Address, State Zip of Church: _____

1st Confession/Penance: _____ Y _____ N If yes, when and where? _____

1st Eucharist: _____ Y _____ N If yes, name and denomination of Church: _____

Confirmation: _____ Y _____ N If yes, name and denomination of Church: _____

MARITAL STATUS: _____ Single _____ Married _____ Divorced _____ Remarried

If SINGLE, are you engaged or soon to be engaged? _____ Y _____ N

If soon to be or engaged, are you cohabitation (Living together) with your future spouse? _____ Y _____ N

Your Current Marriage (if applicable): Date of Marriage - _____

In what Church or Location were you married? _____

Who was the presiding minister or official? _____

What was the denomination or religion of the presiding minister (if applicable)? _____

Into what religion/ religious denomination was your spouse baptized? _____

Is your spouse previously married? _____ Y _____ N

Did this/these prior marriage(s) receive a Catholic annulment? _____ Y _____ N

Please list all previous marriages FOR YOU OR YOUR SPOUSE below (even if currently not married):

Your Prior Marriage #1: Dates Married - _____ Location of Wedding _____

Who was the presiding minister or official? _____

What was the denomination or religion of the presiding minister (if applicable)? _____

Into what religion/religious denomination was your spouse baptized? _____

Is your spouse previously married? ___ Y ___ N

Did this/ these prior marriage(s) receive a Catholic annulment? ___ Y ___ N

Prior Marriage #2: Dates Married - _____ Location of Wedding _____

Who was the presiding minister or official? _____

What was the denomination or religion of the presiding minister (if applicable)? _____

Into what religion/religious denomination was your spouse baptized? _____

Is your spouse previously married? ___ Y ___ N

Did this/ these prior marriage(s) receive a Catholic annulment? ___ Y ___ N

If your SPOUSE is remarried, please list all their previous marriages below to the best of your ability:

Prior Marriage #1: Date Married - _____ Location of Wedding _____

Who was the presiding minister or official? _____

What was the denomination or religion of the presiding minister (if applicable)? _____

Into what religion/religious denomination was your spouse baptized? _____

Is your spouse previously married? ___ Y ___ N

Did this/ these prior marriage(s) receive a Catholic annulment? ___ Y ___ N

Other marriages – List any other or your spouse’s previous marriages: _____

REGULAR FAITH PRACTICE :

Weekly Sunday Mass: _____ Y _____ N Other faith activities, groups, service (please specify): _____

PARISH STATUS, ETC. :

Do you regularly attend St. Raymond’s for Sunday Mass? _____ Y _____ N

Are you a registered parishioner of St. Raymond’s (if you are you would be receiving monthly contribution envelopes)? _____ Y _____ N _____ N, but in process

If you are not a registered parishioner of St. Raymond’s, why would you like to pursue RCIA or Adult Confirmation preparation here at St. Raymond’s? : _____

I am attending RCIA because:

_____ I wish only to inquire into the Catholic faith or am unsure but want to enter the RCIA process.

_____ I fully intend on entering the Catholic Church this coming Easter Vigil

_____ I am Catholic and would like to received Adult Confirmation in Spring or August

_____ I would like to receive one or more of the sacraments at a time other than Easter (please specify below which sacraments and why you are pursuing these at a time other than Easter.

_____ Baptism _____ First Eucharist _____ Adult Confirmation