

St. Dominic
RCIA "A Journey in Faith"
(Please Print)

*Full Name of Candidate: _____
(Last) (First) (Middle) (Maiden)

*Full Address: _____
(Street) (City) (Zip)

*Phone Number: _____ * E-Mail Address _____

*Date of Birth: _____ * Place of Birth: _____
(Month) (Date) (Year) (City) (State/Country)

*Father's Full Name: _____
(First) (Middle) (Last)

*Mother's Full Name: _____
(First) (Middle) (Maiden) (Married)

*Were you Baptized? Yes__ No__ *What Religion? _____ * Date of Baptism: _____

*Church Name & Address of Baptism: _____

(Address) (City) (State/Country) (Zip)

*Have you received the Sacraments of Penance? Yes __ No__ Eucharist? Yes__ No__ Confirmation? Yes__ No__

*Church Name and Address: _____

*Are You: Married? Yes __ No__ Widowed? Yes __ No__ Separated? Yes __ No__
Divorced? Yes __ No__ Remarried? Yes __ No__ Living With? Yes __ No __

*Spouse/Fiancé Full Name _____

*Where you Married by a Priest? Yes __ No __ * Date of Marriage: _____

*Location of Marriage: _____

*Name of Church of Marriage: _____

*Confirmation Name: _____ * Sponsor Name: _____

(√) Sacraments Received at Easter or other Office information

Baptism: _____ Holy Communion: _____ Confirmation: _____

Fee: \$25. _____ Date of Registration: _____

