St. Genevieve Church 815 Barbier Avenue Thibodaux, LA 70301 985-446-5127

Rite of Christian Initiation of Adults (RCIA)

Journey of Faith

Name				
First	Middle	Last	Wish to be Called	Maiden
Home Address				
1	Number	Street Name		City, State, Zip
Mailing Address				
1	Number	Street Name		City, State, Zip
Home Phone		Cell	E-mail (optional)	
Place of Work			Work Phone(s)	
Date of Birth		Place of Birth _		
Please list the na	mes and ages (of family members with	whom you live:	
rease fist the fia.	ines and ages (or raining members with	whom you live.	
Father's Name _				
	First	M.I.	Last	Religion
Mother's Name _				
I	First	M.I.	Maiden (or Last)	Religion
Why have you co	ome to the jour	rney of faith at this time	?	
I have ou	estions to ask	of the Catholic Church.		
•		coming Catholic.		
		come a Catholic.		
			rament(s) of	
Lam Cathalia an	d I to b	:41-		
i am Camone and	a i came to be	witti		
Other				
Are you registere	ed with St. Ger	nevieve Church?		
. I o jou registere				