



2019-20 RCIA Sign Up

Full Name: _____

Date of Birth: _____

City (and State) in which you were born: _____

Full Name of Father: _____

Full Name of Mother (maiden name): _____

Current Street Address: _____

City, State, Zip Code: _____

Phone Number: _____

E-mail address: _____

Sacraments Desired (check all that apply):

- Baptism
- First Communion
- Confirmation

For those already Baptized:

Check one:

- Catholic
- Non-Catholic

Date of Baptism: _____

Parish/Church in which you were Baptized: _____

City of Parish/Church in which you were Baptized: _____

FOR OFFICE TO FILL OUT LATER:

Name of Sponsor: _____