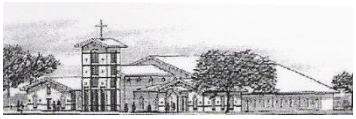
St. Joseph RCIA Registration Form



Name (First):_____ (Middle):_____(Last):_____

Date of Birth:_____ If Female, Maiden Name:_____

Contact Information:

Mailing Address:_____

City:_____State:_____ Zip Code:_____

Phone:_____ Email:_____

Religious Information:

1. What, if any, is your present religious affiliation?_____
2. Have you ever been baptized? ❒ Yes ❒ No ❒ I am not sure

   If yes, what was the date of your baptism_____, the City and State _____

   and the name and address of the church _____

   >>>> Please contact the church of baptism and request a baptismal certificate<<<<
3. I was baptized Catholic, but have not received First Communion? ❒ Yes ❒ No ❒ I am not sure
4. I was baptized Catholic and received First Communion, but have not been Confirmed? ❒ Yes ❒ No
5. If (or my spouse) was baptized Catholic, our wedding was recorded on my (our) Catholic baptismal certificates? ❒ Yes ❒ No ❒ I am not sure

Current Relationship and Marital Information:

Please select the boxes that best explains you.

❒ I am single and have never been married.
❒ I am engaged to be married.
❒ I am in a significant, cohabitating relationship.
❒ I am not currently married, but I have been married before.
Or, I am currently married and
- ❒ this is my (and my spouses) only marriage.
- ❒ I (or my spouse) have been married before.

Parents Names:

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

Mother's Name (First):_____(Middle):_____(Maiden):_____