

RCIA/RECEPTION INQUIRER INFORMATION

Name: _____
(first) (middle) (last) (maiden name)

Address: _____

Home Phone: _____ Cell: _____ Work: _____
If filling in online, use numbers only – no dashes or parentheses

Email Address: _____

Date of Birth: _____ Place of Birth: _____

Father's Name: _____

Mother's Maiden Name: _____

Your Present Religion: _____

Baptized? Yes No If Yes - Date of Baptism: _____

Church where Baptized: _____

City/State: _____

Are you? (check all that apply)

single engaged married separated divorced

Marriage Information: Date of wedding: _____

Place/Church: _____

City/State: _____

Spouse's name: _____

Spouse's Religion: _____

In the space below, briefly describe your desire for full reception into the Catholic Church: