## ST. JOSEPH CHURCH

## 2023-2024 Registration for the Rite of Christian Initiation of Adults (RCIA)

Name:				
First	Middle		Last	(Maiden)
Date of Birth:I				
	City	State	(Country)	
Father's Name:	1	Mother's Na	ame	
Your Current Address:Street		City, S	toto	ZIP
Tour Current Address. Street	•	City, S	olale	ZIF
Telephone: Main Phone (C	*	Minor, Par	<u>rent's Phone)</u>	
mail Address: (print legibly	)		(If	Minor, Parent's emai
Provide a copy of your Birth (	Certificate.			
Baptismal Status (Please chec		provide a cop	ov of vour Baptism	al Certificate. )
Unbaptized Baptized non-Catholic; Baptized Catholic	, , ,			,
Certificate.)  Received First Communi Did not receive First Communi Received Confirmation Did not receive Confirmation	nmunion			
Marital Status				
Single (never married) Separated Married	- - -	Wido Divor Divor		ried
If Married, Your spouse is:				
CatholicNor	n-Catholic Christian		_Unbaptized	
If you checked "Married" or "Div	vorced and Remarrie	d" nlease inc	dicate type of ma	arriage:
Civil Marriage	vorcea and remarries	-	Catholic Christi	_
Catholic Marriage	•			<b>3</b> .
Were you <u>or your current spous</u> Marriage(s) Annulled by the Cat		arried, was	(were) the	