

Church of St. Ambrose  
346 Old Loudon Rd.  
Latham, NY 12110  
(518) 785-1351

# RCIA REGISTRATION

(Information is held in confidence and is not shared without your permission)

Today's Date: \_\_\_\_\_

## 1. Personal Information:

First Name: \_\_\_\_\_ Middle \_\_\_\_\_ Last Name: \_\_\_\_\_

Maiden Name (If Applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's name & maiden Name: \_\_\_\_\_

## 2. Contact Information

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Occupation: \_\_\_\_\_

## 3. Religious History

1. What, if any, is your present religious affiliation? \_\_\_\_\_

2. Have you ever been baptized?  Yes  No  I am not sure

*If you answered "Yes" to Question 2, Please provide the following information:*

3. In what denomination were you baptized? \_\_\_\_\_

4. Place of Baptism (Name of Church/denomination) \_\_\_\_\_

5. If you were baptized as a Catholic, check those sacraments you have already received:

Penance(Confession)  Eucharist(1<sup>st</sup>. Communion)  Confirmation

**4. Current Marital Status**

1. \_\_\_ I am single, have never been married.

2. \_\_\_ I am engaged to be married.

(a) Your fiancé(e)'s Full Name: \_\_\_\_\_

(b) Your fiancé'(e)'s Current Religious Affiliation (if any) \_\_\_\_\_

(c) For you: \_\_\_ This is my first marriage. \_\_\_ I have been married before.

(d) For your fiancé'(e): \_\_\_ This is my fiancé'(e)'s first marriage

\_\_\_ My fiancé(e)'s has been married before.

3. \_\_\_ I am Married.

(a) Your Spouse's Full Name: \_\_\_\_\_

(b) Your Spouse's Current Religious Affiliation (if any): \_\_\_\_\_

(c) For you: \_\_\_ This is my first marriage. \_\_\_ I have been married before.

(d) For your Spouse: \_\_\_ This is my Spouse's first marriage. \_\_\_ My Spouse has been married before.

(e) Date of Marriage: \_\_\_\_\_ (f) Place of Marriage: \_\_\_\_\_

4. \_\_\_ I am married, but separated from my spouse.

5. \_\_\_ I am divorced and I have not remarried.

6. \_\_\_ I am a widow/widower.

**7. Children – Names, ages, grades and whether or not they have been baptized:**

Name	Age	Grade	Sacraments Received

Will you need Babysitting? \_\_\_\_\_ Yes \_\_\_\_\_ No. For how many? \_\_\_\_\_

Any special needs? \_\_\_\_\_ Known allergies? \_\_\_\_\_

**8. Reason for inquiring about RCIA**

Briefly describe your own religious education or church background. \_\_\_\_\_

\_\_\_\_\_

How have you come to be interested in the Roman Catholic Church? \_\_\_\_\_

\_\_\_\_\_

How would you describe your relationship with God now? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there one person in particular who is responsible for your interest in the Roman Catholic Church?  
Will that person be acting as your sponsor and walking this journey with you? \_\_\_\_\_

\_\_\_\_\_

What are your expectations? \_\_\_\_\_

\_\_\_\_\_

Do you have any questions you would like answered at this time? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_