



ALL SAINTS CATHOLIC CHURCH

R.C.I.A.

530 Highway 274

P.O. Box 5443 – Lake Wylie, SC

☎ (803) 831 9095 - allsaintsparish@bellsouth.net

Sacrament: _____ Parish Registration # _____

Candidate Information

Full Name: _____

Please check one: Adult Teen or Child Age _____

Address: _____

City: _____ State _____ Zip Code _____

Home Phone: (____) _____ Work Phone (____) _____

Cell Phone: (____) _____ E-mail _____

Date of Birth: ____/____/____ Place of Birth _____

Father's Name: _____

First Middle Last

Father's Religion: Catholic Other _____

Mother's Full _____

Maiden Name: First Middle Last (Maiden)

Mother's Religion: Catholic Other _____

Other Sacraments Received

Have you been No Yes – Denomination: _____
baptized?

If yes, when (date)? _____

Where? (Name of Church) _____

Where? (City/State/Zip) _____

You **MUST** provide a copy of your baptismal certificate.

First Communion: Yes No Not sure

Reconciliation: Yes No Not sure

Confirmation: Yes No Not sure

SECTION A – Marriage

- I am not married
- I am currently engaged
- I have been married once
- I have been married more than once
- My marriage was annulled
- My marriage is in the annulment process
- I am presently separated
- I am separated and have since remarried
- I am divorced but have not remarried
- I am divorced and have since remarried

SECTION B – R.C.I.A. Information

You must provide the following information before the Rite of Christian Initiation for Adults take place:

Confirmation Name (must be a saint name): _____

Sponsor's Full Name: _____ Age: _____

Candidate Signature

Date

Thank You!