

St. John the Baptist Catholic Parish

1055 Hughes Road

Madison, AL 35758

Office of Adult Faith Formation

Phone: 256-722-7929 x 109; Email: ocia@stjohnbchurch.org

Sacrament Year:



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

Mailing Address: _____
(Street)

(City, State, Zip)

Phone: _____ Can this number receive text messages? Yes / No

Email Address: _____ Occupation: _____

Date of Birth: _____ Place of Birth: _____
(MM/DD/YYYY) (City, State)

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

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

Baptismal Status

- Never Baptized
- Baptized in another Christian Denomination
- Baptized in the Catholic Church; have **not** received Sacraments of Eucharist and/or Confirmation
- Baptized in the Catholic Church and have received all Sacraments

Baptismal Information

Date of Baptism (approx.): _____ Denomination _____

Church of Baptism: _____

Location (City/State): _____

Do you have a sponsor? Yes / No

Sponsor Name: _____ Member of St. John's? Yes / No

Do you need assistance in finding a sponsor? Yes / No. *(continued on reverse side)*

Confirmation Name: _____

Marital Status

- Single, never married.
- Widow/Widower not remarried.
- Divorced, not remarried.
- Married and (mark all that apply):
 - No previous marriages.
 - Previously married; previous spouse now deceased.
 - Previously married; previous spouse is still living.

Has your current spouse been previously married?

- No
- Yes; spouse in previous marriage now deceased.
- Yes; spouse in previous marriage is still living.

Current spouse's name: _____
(First) (Middle) (Maiden) (Last)

Where were you married? _____

Children

If you have children and would like them to receive instruction in the Catholic Faith, complete the following:

Name (First, Last)	Age (MM/DD/YYYY)	Baptized (Circle Y or N)	Religion
1. _____	_____	Y N	_____
2. _____	_____	Y N	_____
3. _____	_____	Y N	_____
4. _____	_____	Y N	_____
5. _____	_____	Y N	_____

Childcare may be available each Thursday night OCIA is in session. Will you need this service? Yes / No
(If yes, please fill out a Nursery Registration Form)

Why are you interested in attending OCIA? (select all that apply):

- I want to become Catholic.
- My spouse is Catholic and I want to learn more.
- A family member or friend is Catholic and I want to learn more.
- I just want to learn more about the Catholic Faith.
- I'm not sure why I'm here, but I feel like I need to be.
- Other _____