

St. Barnabas Church O.C.I.A.
(Order of Christian Initiation of Adults)
REGISTRATION FORM

****For Baptism, one Godparent is required. Two are optional. Please see the handout "Guidelines for OCIA Sponsors" as you consider who to ask to be your Godparent. (Your Godparent cannot be your parents and should not be your spouse, or your spouse's parents)*

Godfather: _____ Cell Phone: _____ is text okay? ____
E-mail: _____

Godmother: _____ Cell Phone: _____ is text okay? ____
E-mail: _____

*****If not Baptized OR Baptized in another denomination your *Birth* Certificate is required. *****

If Baptized in another Christian faith, please complete the following:

Place of Birth: _____ Birth date: _____
City State

Place of Baptism: _____ Baptism Date: _____
City State

***** If you are a Baptized Christian, a copy of Your Baptism Certificate is required. *****

If requesting Confirmation, please complete the following:

****For Confirmation, one Sponsor is required. Two are optional. Please see the handout "Guidelines for OCIA Sponsors" as you consider who to ask to be your Godparent.*

****Your Sponsor may not be your parents.*

Sponsor: _____ Cell Phone: _____ Text okay? ____

E-mail: _____

We will endeavor to meet you where you are in your faith journey and we will attempt the fewest classes possible BUT everyone will be expected to attend ALL classes and actively participate in Church Life including attending weekly Masses, and participate in important Liturgical Events and Holy Days of Obligation.

The goal is to be ready for Fr. David to Confirm everyone on the Easter Vigil

The Classes will be 6:00 to 7:30 PM held at St. Barnabas Church on:

Class 1) Monday January 4, 2027 CMR (Chapel Meeting Room)

Class 2) Monday January 25, 2027 Main Church, then CMR (Chapel Meeting Room)

Class 3) Monday February 22, 2027, CMR (Chapel Meeting Room)

Class 4) Monday March 8, 2027, CMR (Chapel Meeting Room)

*** Attend at least 2 Stations of the Cross during Lent (Fridays at 3:00 in Main Church)**

*** TBD - A Sunday Mass Rite of Election (tentatively 3/13/27 5:00 PM Mass)**

*** TBD - Rehearsal during Holy Week (usually Wednesday eve 3/24/27 @6pm)**

*** Attend the Triduum: Holy Thursday 3/25/27 7:00 PM & Good Friday 3/26/27 7:00 PM**

*** 3/27/2027 7:00 PM Easter Vigil for needed Sacraments and Confirmation**

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First Name: _____ **Middle Name:** _____ **Last Name** _____ **Today's Date:** _____

Today's Date: _____ **Cell Phone:** _____ **Home Phone:** _____ **is text okay** _____

is text okay: _____ **E-mail:** _____

Birthdate: _____ **Place of Birth:** _____

Mailing Address:

Street _____ **Town** _____ **State** _____ **Zip** _____

Were you ever Baptized into ANY Christian Denomination? _____ **Which one?** _____

Catholic Sacraments you are Requesting: **Baptism:** _____ **First Communion:** _____ **Confirmation:** _____

Or: _____ I am curious about the Catholic faith and not seeking any Sacraments at this time.

Are you a REGISTERED Parishioner of St. Barnabas Church? **YES** _____ **NO** _____

Are you currently going to Mass on a weekly basis? **YES** _____ **NO** _____

If Yes, Which Mass do you attend? Time: _____ **If No, How often do you typically attend Mass?** _____

*Or: _____ I attend Mass at another Parish: _____
and I am seeking my Sacraments here instead of my home parish because: _____*

Current Marital Status:

- | | |
|---|---|
| _____ Single, (Never Married) | _____ Married in the Catholic Church |
| _____ Divorced _____ Widowed _____ Annuled | _____ Married civilly or in another faith |
| _____ Unmarried, but Cohabiting | _____ Married, Separated from my spouse |
| _____ Engaged to be married in the Catholic Church. <i>**Engaged couples are encouraged to attend classes together.</i> | |

Fiancé's FULL Name: _____

Planned Wedding Date: _____ **Church:** _____

If Married or Engaged:

- | | |
|--|--|
| _____ This is my first marriage | _____ This is my spouse's first marriage. |
| _____ I was previously divorced. | _____ My spouse was previously divorced. |
| _____ I was previously married and
and my spouse passed away. | _____ My spouse was previously married
his/her spouse passed away. |

If requesting Baptism, please complete the following:

Father's FULL Name: _____ **Religion:** _____

Mother's FULL Name: _____ **Religion:** _____ **Maiden Name:** _____