## St. Barnabas Church O.C.I.A.

(Order of Christian Initiation of Adults)

## **REGISTRATION FORM**

| FULL Name:  |  | Today's Date:                  |                                   |  |
|---|--|--------------------------------|-----------------------------------|--|
| Cell Phone:   | Home Phone:                                  |                                | is text okay?                     |  |
| E-mail:   |  |                                |                                   |  |
| Place of Birth:   |  | Birthdate:                     |                                   |  |
| Mailing Address:  |  |                                |                                   |  |
| Street  | _ Town                                       | State                          | Zip                               |  |
| Sacraments you are Requesting: Or: I am curious about the C | Baptism Catholic faith and not seeki         | First Communioning any Sacrame | n Confirmation nts at this time.  |  |
| Are you a REGISTERED Parishi                                | oner of St. Barnabas Ch                      | urch? Y                        | TES NO                            |  |
| Are you currently going to Mass                             |  |                                |                                   |  |
|   |  |                                |                                   |  |
| Yes, Which Mass do you No. How often do you typical         | ly attend Mass?                              |                                |                                   |  |
| Or:I attend Mass at another                                 | r Parish:                                    |                                |                                   |  |
| and I am seeking my Sacraments he                           | re instead of my home par                    | rish because:                  |                                   |  |
| Current Marital Status:                                     |  |                                |                                   |  |
| Single, Never Married                                       | Mar  | rried in the Cath              | olic Church                       |  |
| Divorced  | Ma:  | rried civilly or in            | n another faith                   |  |
| Unmarried, Cohabiting                                       | Na   | rried, Separated               | from my spouse                    |  |
| Engaged to be married in the                                | Catholic Church. **Engage                    | d couples are encou            | raged to attend classes together. |  |
| Fiancé's FULL Name:   |  |                                |                                   |  |
| Planned Wedding Date:                                       | Church:                                      |                                |                                   |  |
| If Married or Engaged:                                      |  |                                |                                   |  |
| This is my first marriage                                   | arriage This is my spouse's first marriage.  |                                |                                   |  |
| I was previously divorced.                                  | ivorced My spouse was previously divorced.   |                                |                                   |  |
| I was previously married and                                | narried and My spouse was previously married |                                |                                   |  |
| and my spouse passed away                                   | his/her sp                                   | pouse passed awa               | ay.                               |  |
| If requesting Baptism, please Father's FULL Name:           |  |                                |                                   |  |
| Mother's FULL Name:   | Mother's Maiden Name:                        |                                |                                   |  |
| ***For Baptism, one Godparent is                            | required. Two are optiona                    | al. Please see the             | e handout "Guidelines for OCIA    |  |
| Sponsors" as you consider who to a                          |  |                                |                                   |  |
| ***Your Godparent cannot be your                            | -  | e your spouse, or              | r your spouse's parents.          |  |
| Godfather:  | Cell Phor                                    | ne:                            | is text okay?                     |  |
| E-mail:   |  |                                |                                   |  |
| E-mail:  Godmother:   | Cell Phor                                    | ne:                            | is text okay?                     |  |
| E-IIIaii.   |  |                                |                                   |  |
| ***If not Baptized OR Baptized i                            | n another denomination                       | your Birth Cer                 | tificate is required. ***         |  |

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

## **REGISTRATION FORM**

| If Ba      | aptized in another Christian fa  | aith, please complete the f                                     | following:<br>:                 |
|------------|--|---|---------------------------------|
| 1 lacc     | e of Birth: City   | State Birth date  | •                               |
| Place      | e of Baptism:  | Bantism 1   | Date:                           |
|            | City   | State   | •                               |
| *** I      | If Baptized, a copy of Your Baptism  | Certificate is required. ***                                    |                                 |
| If re      | equesting Confirmation, please   | e complete the following:                                       |                                 |
|            | For Confirmation, one Sponsor is requ  |   | see the handout "Guidelines for |
|            | A Sponsors" as you consider who to a   |   |                                 |
|            | our Sponsor may not be your parents  |   | m . 1 . 0                       |
|            | sor:<br>ail:   |   | Text okay?                      |
| ***        | ********   | ********  | *******                         |
| The        | e goal is to be ready for  | Fr. David to Confir   | m everyone on the               |
| Eas        | ster Vigil   |   | · ·                             |
| the factiv | will endeavor to meet you whe<br>fewest classes possible BUT ev<br>vely participate in Church Life<br>ortant Liturgical Events and I | veryone will be expected to<br>e including <u>attending wee</u> | attend ALL classes and          |
| The        | e Classes will be 6:00 to  | 7:30 PM held at St.   | Barnabas Church on:             |
|            | iss 1) Monday January  |   |                                 |
| Cla        | iss 2) Monday February   | y 9, 2026 Main Chur   | ch, then CMR                    |
| Cla        | ass 3) Monday March 2,   | , 2026, Chapel Meet   | ing Room                        |
| Cla        | ass 4) Monday March 10   | 6, Chapel Meeting R   | Room                            |
| *          | Attend at least 2 Stati  | one of the Cross du   | 200111                          |
| *          | TBD - A Sunday Mas   | ons of the Cross du   |                                 |
| *          | TDD Debooweel day  |   |                                 |
|            | 1 DD - Renearsal dur   |   |                                 |
| *          | Attend the Triduum:  | ss Rite of Election ing Holy Week                               | ring Lent                       |

4/4/26 7:00 PM Easter Vigil for Confirmation & Sacraments

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