

Received By \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/202\_\_

St. Thomas the Apostle Catholic Church

## ADULT OCIA REGISTRATION FORM

3774 Jackson St. Riverside, CA 92503 951.689.1131 ext. 207

### Personal Information

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

Full Name: \_\_\_\_\_

First

Last

Middle Name

Maiden Name (if applicable) \_\_\_\_\_

Father's Name \_\_\_\_\_ Mother's Full Name \_\_\_\_\_

Include Maiden Name

Current Address: \_\_\_\_\_

City/ State/ Zip Code: \_\_\_\_\_

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

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

City

State

Country

### Contact Information

Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ email: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

First

Last

Phone #

Relationship

### Relationship Status

\_\_\_ Single \_\_\_ Engaged \_\_\_ Married in the Catholic Church \_\_\_ Married civilly

\_\_\_ Living in a "free Union" relationship \_\_\_ Divorced \_\_\_ Widowed

Number of previous marriages: \_\_\_\_\_ Number of times divorced: \_\_\_\_\_

If married civilly are you open having your marriage blessed (con-validated) in the Catholic church? ☐ Yes ☐ No

If married through the Catholic Church. You will need to provide your Catholic marriage certificate along with this registration form.

### Baptism Information

☐ I have never been baptized.

\*If you were baptized outside of the Catholic church please provide the following information.

Date of baptism: \_\_\_\_/\_\_\_\_/\_\_\_\_ Church of Baptism: \_\_\_\_\_

Baptism church address: \_\_\_\_\_

Street address

City

State

zip code

### Communication

#### Please indicate your preference regarding communication:

\_\_\_ I authorize St. Thomas the Apostle to send me an invitation to download the Flocknote app for OCIA class updates and information.

\_\_\_ I decline the Flocknote app invitation and understand I am responsible for maintaining communication with the coordinator via email.

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**ADULT OCIA REGISTRATION FORM**

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**Office Use Only**

**Patron Saint**

Patron Saint Name: \_\_\_\_\_

**Confirmation Sponsor**

Name: \_\_\_\_\_

First

Last

Middle

Maiden (if Applicable)

Turned in Sponsor Form: \_\_Yes \_\_No Copy of Sponsor Confirmation Certificate \_\_Yes \_\_No

Turned in copy of catholic marriage certificate if married: \_\_Yes \_\_No

**Home Parish**

**Received permission from their pastor to attend the OCIA process here at St. Thomas the Apostle**

\_\_ Yes \_\_ No Home Parish: \_\_\_\_\_

Parish Name

City

**Mass attending:** \_\_\_\_\_

**Registered:** \_\_Yes \_\_No **Needs to Register** \_\_ **Only for Sacramental Prep.**

**Tuition: \$70**

Total Tuition Due: \_\_\_\_\_ Tuition Paid (at the time of Registration \_\_\_\_\_ Cash/ Check/ Card: \_\_\_\_\_

Balance: \_\_\_\_\_ \*Defer: \_\_\_\_\_