

Date: ____/____/____

Fee: \$75.00

St. John Paul II Parish
Rite of Christian Initiation of Adults (OCIA)
REGISTRATION FORM

Name: _____ Birth Date: ____/____/____ Age: _____

Mailing Address: _____

Cell Phone: _____ Email: _____

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 currently going to Sunday Mass? ☐ Yes ☐ No

How often do you typically attend mass? _____ (times a month)

The mass you usually attend: **ENG** ☐ 4PM ☐ 8:30AM ☐ 10:30AM **SP** ☐ 5PM ☐ 8:30AM ☐ 11:30AM

☐ I attend mass at another parish: _____

Language Preferred: ☐ English ☐ Spanish

Current Marital Status:

- | | |
|--|---|
| ☐ Single
☐ Living Together
☐ Divorced
☐ Unmarried, Cohabiting | ☐ Married in the Catholic Church
☐ Married civilly or in another faith
☐ Married, separated from my spouse |
|--|---|

If Married or Engaged:

☐ Engaged to be married in the Catholic Church Fiancée's Name: _____

Wedding Date: ____/____/____ Church: _____

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

FOR OFFICE USE ONLY

<i>Date of Payment</i>	<i>Amount Received</i>	<i>Check and/or Cash</i>	<i>Balance</i>