St. John Vianney Parish

**RCIA Registration Form**

Full Name (As appears on your birth certificate)

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(maiden)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street Apt. # City State Zip

Phone: Home\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birth Certificate submitted? Yes\_\_\_\_\_\_\_ No \_\_\_\_\_\_\_

**Faith Background**

Father’s Full Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religious Affiliation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother’s Full Maiden Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Religious Affiliation\_\_\_\_\_\_\_\_\_\_\_\_\_

**Were you baptized?** Yes\_\_\_\_\_\_ No \_\_\_\_\_\_ Certificate submitted? Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

Denomination\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Church Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Have you received 1st Eucharist?** Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

Certificate submitted? Yes\_\_\_\_\_\_ No \_\_\_\_\_\_ Church Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City/State/Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*If you have already received First Eucharist, you are* ***not*** *required to participate in RCIA in order to be confirmed.*

*See the RCIA Coordinator for instructions on receiving the Sacrament of Confirmation.*

**Please submit the following names by the Rite of Acceptance (late fall) or sooner:**

Sponsor \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Must be:*

* + - * Be at least sixteen (16) years of age
* Be a Catholic who has been confirmed and has received the sacrament of Holy Eucharist
* If married, must be married in the Catholic Church
* Be leading a life in harmony with the faith and role to be undertaken
* Not be bound by any canonical penalty
* Not be the spouse, mother or father of the one to be baptized or confirmed. (Canon 874.2)

Name you choose as your Confirmation (Saint) Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Marital Status**

**Are you currently married?** Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

If yes, please complete the following:

Name of spouse\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of wedding\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Church where married\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/State/Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s religious affiliation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Married by a Catholic priest? Yes\_\_\_\_\_\_Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No\_\_\_\_\_\_

**Have you been previously married?** Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

If yes, please complete the following:

Name of spouse’s previous spouse\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of wedding\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Church where married\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/State/Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s religious affiliation\_\_\_\_\_\_\_\_\_\_\_Married by a Catholic priest? Yes\_\_\_Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No\_\_\_\_

**How did this marriage end?** (i.e., Declaration of Nullity, divorce, death) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of dissolution or death\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Certificate submitted? Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

**Was your current spouse previously married?**  Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

If yes, please complete the following:

Name of spouse’s previous spouse\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of wedding\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Church where married\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City/State/Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Spouse’s religious affiliation\_\_\_\_\_\_\_\_\_\_\_\_\_

Married by a Catholic priest? Yes\_\_\_Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_No\_\_\_\_

**How did this marriage end?** (i.e., Declaration of Nullity, divorce, death) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of dissolution or death\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City/State/Country \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Certificate submitted? Yes\_\_\_\_\_\_ No \_\_\_\_\_\_

*It is important that you turn in all certificates and other documentation,* ***as soon as possible.*** *Thank you!*

8/17/16:dnc