

## Sign-Up Form

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

How best may we communicate with you (email/call/text?): \_\_\_\_\_

Would you like us to send you event reminders (Yes/No)?: \_\_\_\_\_ Preferred Method: \_\_\_\_\_

*The following information is required for sacramental records. Complete information is very helpful to facilitate the process. The RCIA team can answer any questions you may have about this information.*

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

Father's Name (First/Middle/Last): \_\_\_\_\_

Mother's Name (First/Middle/Last): \_\_\_\_\_

Have you ever been baptized? (Yes/No): \_\_\_\_\_ If yes, Date of Baptism: \_\_\_\_\_

If Yes, Name of Church/Denomination: \_\_\_\_\_

City/State of Church: \_\_\_\_\_

*A copy of your baptismal certificate is required. The RCIA team can help facilitate this if needed.*

Marital Status (Single/ Engaged/ Married /Separated /Divorced/ Widowed): \_\_\_\_\_

If Married, Name of Spouse (include Maiden Name): \_\_\_\_\_

If Married, Date of Marriage: \_\_\_\_\_ Spouse Baptized (Y/N)?: \_\_ Spouse Catholic (Y/N)?: \_\_

If Married, Name of Church: \_\_\_\_\_

Church Denomination: \_\_\_\_\_ City/State of Church: \_\_\_\_\_

If Divorced, please provide name (including Maiden Name) of ex-spouse, date of marriage, and date of divorce: \_\_\_\_\_

Children (please provide name, date of birth, and if baptised, include date/place of baptism):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

Is it your desire that any of your children become Catholic (Yes/No): \_\_\_\_\_ If yes, names of children: \_\_\_\_\_

Do you need childcare during RCIA class (Yes/No): \_\_\_\_\_ Number of children: \_\_\_\_\_

*If you already have a preferred sponsor, please list their information below. Otherwise, the RCIA team will work to match you with a Blessed Sacrament parishioner.*

Preferred Sponsor Name: \_\_\_\_\_

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

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

*If you have any questions regarding this form, please contact Nathan Bainbridge, RCIA Director, at [natebainbridge@gmail.com](mailto:natebainbridge@gmail.com) or (316) 243-7323.*