ORDER OF CHRISTIAN INITIATION FOR ADULTS

St. Aloysius Catholic Church, Baton Rouge LA

REGISTRATION FORM



CONTACT INFORMATION											
FIRST NAME			MIDDLE NAME		Females-Maiden LAST NAME:			VE:	TODAY'S DATE		
					Married Last Name:						
DATE OF BIRTH AGE			PLACE OF BIRTH		O MALE OCCUP			OCCUPA	TION		
			Copy of birth certificate required if yo continue the process.		<mark>u</mark>	0	FEMALE				
	ADDRESS										
			O YES								
	PHONE		O NO								
	FATHER'S FULL NAME MOTHER'S FULL NAME W/MAIDEN										
REL	IGIOUS HISTORY										
	CURRENT RELIGION IF AN					HAVE YOU EVER BEEN					
	IF BAPTIZED, WHAT DENOMINATION WERE YOU BAPTIZED?								BAPTIZED?		
									O YES		
	APROXIMATE AGE NAME OF CHURCH WHERE BAPTIZED AT BAPTISM								O NO		
	CHURCH LOCATION					If you have been baptized, a recent certified copy of your baptismal certificate or a letter from the church is needed if you continue the process.					
	IF YOU WERE BAPTIZED CATHOLIC:										
	DID YOU MAKE YOUR F	ssion)?	O YES	S	O NO		<mark>lf you made</mark>				
	NAME OF CHURCH PARISH WHERE YOU MADE YOUR FIRST RECONCILIATION:								your First Eucharist, a		
	DID YOU MAKE YOUR F	O YES	5			copy of your certificate is needed.					
	NAME OF CHURCH PARISH N MADE YOUR FIRST EUCHARI										
	WERE YOU CONFIRMED IN THE CATHOLIC CHURCH? O YES O NO, NO					NOT YET					
SPC	DNSOR / GODPARENT IN	IFORMA	TION								

Please let us know if you have someone in mind to be your godparent(s) or sponsor. If not, we have many parishioners who would love to accompany you on your faith journey.

CURRENT MARITAL STATUS												
	0	I have never been married.										
	0	I am engaged to be married.										
		Fiancé(e)'s F	First Name	Middle Name		Last Name						
		Fiancé(e)'s F	Religion		Occupation							
		Fiancé(e)'s Religion Occupation										
		Do you have any previous marriages? O YES O NO										
		Does your fiancé(e) have any previous marriages? O YES O NO										
		Would you like to talk to someone about being married in the Catholic Church? O YES O NO										
	0	I am marri	ed.									
		Spouse's Fir	st Name	Middle Name		Last Name						
		Spouse's Re	ligion		Occupation							
		Marriage Da	ate	Place of Marria	ge (If church ma	rriage, name & place of church)						
		Do you have any previous marriages? O YES O NO										
		Does your spouse have any previous marriages? O YES O NO										
		Copy of current marriage certificate or licence is required if you continue the process.										
	0	I am marri										
	O I am divorced and have not remarried.											
	0	I am a wid	ow / widower and	have not rem	arried since	my spouse's death.						
F/	AMILY I	INFORMATION	N									
	Child	lren										
G	ENERAI	L										
		Which of the following statements best describes your present feelings about the possibility of joining he Catholic Church?										
	_											
	J	I am not presently interested in joining the Catholic Church, but I want to learn more about it. I am considering joining, but I am unsure about it.										
	0											
	O I want to join the Catholic Church.											