



Registration for Christian Initiation and Adult Sacrament Preparation

Receipt Number ARE-_____

Christian Initiation

Today's Date: _____

Adult Sacrament Preparation

Name, Address, and Contact Information

First: _____ Middle: _____ Last: _____

Maiden Name: _____

Address Street and Number: _____

City _____ State: _____ Zip code: _____

Cell Ph: (_____) _____ Home Ph: (_____) _____

Email: _____

Marital Status- *Please check as appropriate.*

Never married

Widowed

Married (*in the Catholic Church*)

Divorced

Married (*civil, judge, or in another church*)

Sacramental Status- *Please check as appropriate.*

I am a non-Catholic...

who has never been baptized

who has already been baptized in a non-Catholic Christian community

Previous religious affiliation, if any _____

I am a Catholic who has already received the Sacraments of...

Baptism

Holy Eucharist

Confirmation

Penance (*Confession, Reconciliation*)

Baptism Information- ***Please attach a copy of your Baptism Certificate to this form.***

I was baptized on: (*date*) _____ Name: _____

If non-Catholic, name the denomination. _____

Name of Church: _____

Location: (*City, State or Country*) _____

Note: If you were baptized outside the Catholic Church and then Received into the Church at a later date, we will also need the name and location of the Church where you were received into full communion and the date you were received. Please write this information on the back of this form.