## St. Eugene's RCIA PARTICIPANT INFORMATION FORM 2023-2024

| 1. GENER   | AL INFORMATIO          | N                            |           |             |                     |                       |  |
|--|------------------------|------------------------------|-----------|-------------|---------------------|-----------------------|--|
| First Name   | ::                     | Mid. l                       | In.:      | I           | Last Name:          |                       |  |
| Maiden Na  | me (if applicable):    |                              |           |             |                     |                       |  |
| Date of Bir  | Place of Bir           |                              |           |             |                     | Age:                  |  |
| Father's ful   | ll name:               |                              |           |             |                     |                       |  |
| Mother's fu  | ıll name:              |                              |           |             |                     |                       |  |
| Mother's m   | naiden name (first a   | nd last name):               |           |             |                     |                       |  |
| 2. CONTA   | CT INFORMATIO          | N                            |           |             |                     |                       |  |
| Full Mailing   | g Address:             |                              |           |             |                     |                       |  |
| City:  |                        |                              | State:    |             |                     | Zip:                  |  |
| Home Phone:  |                        |                              |           | Cell Phone: |                     |                       |  |
| Email Addr   | ress:                  |                              |           |             |                     |                       |  |
| 3. CURRE   | NT MARITAL STA         | TUS                          |           |             |                     |                       |  |
| Please chec  | ck and fill out the in | formation (if a <sub>]</sub> | pplicable | e) that a   | applies to you.     |                       |  |
| I have   | e never been marrie    | d                            |           |             |                     |                       |  |
| I am engaged to be married                               |                        |                              |           |             |                     |                       |  |
| a.) Your fiancé's name:                                  |                        |                              |           |             |                     |                       |  |
| b.) Your fiancé's current religious affiliation, if any: |                        |                              |           |             |                     |                       |  |
| c.) Will this be your first marriage?                    |                        |                              |           |             |                     |                       |  |
| d.) Will this be your fiancé's first marriage?           |                        |                              |           |             |                     |                       |  |
| e.) Scheduled date and location of wedding?              |                        |                              |           |             |                     |                       |  |
| I am r   | narried                |                              |           |             |                     |                       |  |
| a.) Your spouse's name:                                  |                        |                              |           |             |                     |                       |  |
| b.) Your spouse's current religious affiliation, if any: |                        |                              |           |             |                     |                       |  |
| c.) Is this your first marriage?                         |                        |                              |           |             |                     |                       |  |
| d.) Is this your spouse's first marriage?                |                        |                              |           |             |                     |                       |  |
| e.) Date of marriage:                                    |                        |                              |           |             |                     |                       |  |
| f.) Plac   | f.) Place of marriage: |                              |           |             |                     |                       |  |
| g.) Min  | ister of marriage:     | Civil Governm                | ıent      | _ Chr       | istian Minister     | Catholic Priest       |  |
| If yo  | our Marriage was i     | not in the Cath              | ıolic Chı | urch, yo    | ou need to be awa   | re that your marriage |  |
| will   | need to be conval      | idated in the (              | Catholic  | : Churc     | <b>h?</b> Signature |                       |  |

| I am married, but separated from my spouse   |                                     |                                     |  |  |  |  |  |
|--|-------------------------------------|-------------------------------------|--|--|--|--|--|
| I am divorced and have not remarried   |                                     |                                     |  |  |  |  |  |
| I am a widow/widower and have not remarried since my spouse's death  |                                     |                                     |  |  |  |  |  |
| 4. FAMILY INFORMATION  |                                     |                                     |  |  |  |  |  |
| Please list the name(s) of any chi   | ildren or dependents you have. (e.; | g. Daughter – Jane; Stepson – John) |  |  |  |  |  |
| Name:  | Relationship:                       | Age:                                |  |  |  |  |  |
| Name:  | Relationship:                       | Age:                                |  |  |  |  |  |
| Name:  | Relationship:                       | Age:                                |  |  |  |  |  |
| Name:  | Relationship:                       | Age:                                |  |  |  |  |  |
| 5. RELIGIOUS HISTORY   |                                     |                                     |  |  |  |  |  |
| What, if any, is your present religious affiliation?   |                                     |                                     |  |  |  |  |  |
| what, if any, is your present reng   | gious anniation:                    |                                     |  |  |  |  |  |
| Have you ever been baptized? (c  | heck one) Yes No                    | I'm not sure                        |  |  |  |  |  |
| If Yes   |                                     |                                     |  |  |  |  |  |
| a.) In what denomination?  |                                     |                                     |  |  |  |  |  |
| b.) Date or approximate age of baptism:  |                                     |                                     |  |  |  |  |  |
| c.) In what church?  |                                     |                                     |  |  |  |  |  |
| d.) Location of church, if known (city, town, state, and country):   |                                     |                                     |  |  |  |  |  |
|  |                                     |                                     |  |  |  |  |  |
| If you were baptized Catholic, please check the following Sacraments you have already received:            |                                     |                                     |  |  |  |  |  |
| Confession First Communion Confirmation  |                                     |                                     |  |  |  |  |  |
| RCIA PROCESS   |                                     |                                     |  |  |  |  |  |
| If you are planning to be Bapti  | zed and receive Confirmation, a     | sponsor is required:                |  |  |  |  |  |
| Do you have a sponsor for Baptis   | sm/Confirmation?                    | Relationship                        |  |  |  |  |  |
| Sponsor's name   | Phone                               |                                     |  |  |  |  |  |
| Sponsor's Baptism date/Church  |                                     |                                     |  |  |  |  |  |
| Sponsor's Confirmation date/Church   |                                     |                                     |  |  |  |  |  |
| Saint's name you will take for Confirmation (if known) ?   |                                     |                                     |  |  |  |  |  |
| Your sponsor will be required to fill out a Sponsor Eligibility Form before being accepted to fulfill this |                                     |                                     |  |  |  |  |  |
| role.  |                                     |                                     |  |  |  |  |  |
|  |                                     |                                     |  |  |  |  |  |
|  |                                     |                                     |  |  |  |  |  |

| 6. GENERAL QUESTIONS   |
|--|
| What or who has led you to want to know more about the Catholic faith?   |
|  |
| Please describe the types of religious education you have received, as a child and as an adult.  |
|  |
| What contact have you had with the Catholic Church to date?  |
|  |
| What are some of the questions or concerns you have about the Catholic Church?   |
|  |
| If you are not Catholic, please check the statement that best describes your present thoughts and feelings about possibly joining the Catholic Church. |
| I need much more information about the Catholic Church before I would consider joining.  |
| I am considering joining, but I am still unsure about it.  |
| I am fairly sure that I would like to join, but I still need some time to study and pray about it.   |
| I am fairly sure that I want to join the Catholic Church.  |
| Copies of the following are required: a) Birth Certificate b) if baptized, Baptismal Certificate   |
| c) if married, Marriage Certificate  |
| Bring a copy of each to the first class.   |
|  |
| Class fee: \$30.00 cash or check only  |
| For office use only  |
| Sacraments to be received: Baptism Confirmation Holy Communion Matrimony   |
| CatechumenateReception into full Communion   |
| Baptism CertificateConfirmation by Bishop  |
| Necessary resolution of prior marriages of Candidate, spouse, or fiancé?   |
|  |
|  |
| Sponsor's name: Confirmation name:   |