RCIA Candidate Record

Saint Paul Catholic Church

Name	
Address	
	Zip Code
Phone	
Date of Birth	
Place of Birth	
Father's Name	
Mother's Name (maiden)_	
Date and place of Baptism	1
Please provide a copy of y	our baptismal certificate.
Date of Reception (Confirm	mation and First Communion)
Sponsor	
Priest	
Please check all that appl	<u>y:</u>
I have never been	married
I am married now	
I am divorced	
I am divorced and	have remarried
I am divorced and	have not remarried
My spouse has bee	en married only once
My spouse has bee	en married more than once