



O.C.I.A. (Order of Christian Initiation of Adults) Registration Form

Full Name: _____ (Maiden) _____ Date _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Mailing Address:

Street City State Zip

Date of birth _____ Place of birth (City/State) _____

Father's Full Name: _____

Mother's Full Name (including Maiden): _____

Spouse's Full Name (including Maiden): _____

Religion: (Present/Past) _____

Sacraments Requesting: ____ Baptism ____ First Communion ____ Confirmation

Or:

____ *I am curious about the Catholic faith and not seeking any sacraments at this time.*

Do you attend Mass weekly?

____ No. How often do you typically attend Mass? _____

____ Yes. Which Mass time do you usually attend? _____

____ *I attend Mass at another Parish:* _____

and I am seeking my sacraments at Most Sacred Heart of Jesus Parish

instead of my home parish because:

Current Marital Status:

- | | |
|--|---|
| <input type="checkbox"/> Single, never married | <input type="checkbox"/> Married in the Catholic Church |
| <input type="checkbox"/> Divorced | <input type="checkbox"/> Married civilly / Another church |
| <input type="checkbox"/> Unmarried, Cohabiting | <input type="checkbox"/> Married, separated from spouse |
| <input type="checkbox"/> Engaged to be married in the Catholic Church <i>**Engaged couples are encouraged to attend classes together</i> | |

Fiancée's Name: _____

Wedding Date: _____ Church: _____

If you are married, check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> This is my first marriage | <input type="checkbox"/> This is my spouse's first marriage |
| <input type="checkbox"/> I was previously divorced | <input type="checkbox"/> My spouse previously divorced |
| <input type="checkbox"/> I was previously married and my spouse passed away | <input type="checkbox"/> My spouse was previously married his/her spouse passed away |

List the names of children and/or dependents:

Name	Relationship	Age

