

St. Jude Catholic Church  
Rite of Christian Initiation of Adults  
Testimony to the Fact of Baptism - Personal

*This information is held in confidence and will not be shared without your permission.*

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*This form is used when the participant was baptized and there is no written record, but they are seven years of age or older, and remember the details of the Baptism so as to testify that it was validly performed.*

RCIA Participant Name \_\_\_\_\_

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Date when Baptism occurred. \_\_\_\_\_ Is this an approximate date? ☐ Yes

Where did the Baptism take place? Church \_\_\_\_\_

Denomination \_\_\_\_\_

Address (if known) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

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I testify that I baptized by water (immersion or pouring over the head) and *"In the Name of the Father and of the Son and of the Holy Spirit."*

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Printed name of Participant

\_\_\_\_\_  
Date

Mail this form to:

RCIA Coordinator - St. Jude Catholic Church  
930 Ashland Terrace    Chattanooga, TN 37415