

## **OCIA REGISTRATION FORM**

<u>Candidate/Catechumen Information</u> :		
Full Name (including middle name):		
Street Address:		
	Zip code:	
Age: Birthdate: City/Stat	e of Birth:	
Cell phone #: Em	ail:	
Registered Parish: Blessed Sacrament	St. Louis	St. Anthony's
Father's Name:		
Mother's Name, including maiden name:		
Sacrament Information:		
Baptism Church:		
Baptism date, city, state:		
First Penance Church:		
First Penance date, city, state:		
First Eucharist Church:		
First Eucharist date, city, state:		
Marital Status:		
Are you married: Yes / No Are	you engaged to be married:	: Yes / No
If you are married, were you married in the Cath	nolic church: Yes / No	
If you are married, is this your first marriage:	Yes / No	
If you are married, is this your spouse's first ma	rriage: Yes / No	

## **Reason for becoming Catholic:**

We are excited to have you as part of our OCIA (Order of Christian Initiation for Adults) program and to walk with you on this faith journey. Please tell us a little bit about why are becoming Catholic:	

## **Communication:**

Would you like to receive email/text communications about church events and Masses: Y / N (please note that while you are enrolled in the OCIA program you will receive emails and texts about OCIA program requirements).

Submit completed form and sacrament records to CRE, Ashlee Campbell, via email: religioused@stlouisrcchurch.org