

St. James the Apostle Parish
34700 Fremont Blvd,
Fremont, California 94555
Rite of Christian Initiation of Adults
Registration Form

Last Name _____ First Name _____ M.I. _____
Home Address _____ City _____ ZIP: _____
Home Phone _____ Cell Phone _____ Email _____
Date of birth _____ Place of birth (City, State) _____
Father's Name: _____ Mother's Name _____
Father's Religion: _____ Mother's Religion: _____

Baptism:

Have you ever been baptized? Yes ___ No ___ If so, at what age? _____ When: _____ Where: _____
Do you have a Baptismal certificate? Yes ___ No ___ What religion? _____

For Catholics:

Have you received First Communion: Yes ___ No ___ When: _____ Where: _____
Have you received Confirmation: Yes ___ No ___ When: _____ Where: _____

Marriage:

Married ___ Separated ___ Divorced ___ Widow(er) ___ Never been married ___
Married in Catholic Church: Yes ___ No ___
If you have been divorced, have you pursued an Annulment in the Catholic Church? Yes ___ No ___

Other Information:

Please list names of your family members who live with you and their relationship to you:

- | | |
|----|----|
| 1. | 3. |
| 2. | 4. |

Are you a parishioner of St. James the Apostle Church? Yes ___ No ___

Who referred you to this program? _____

RCIA SPONSOR(s):

Name _____	Name _____
Address _____	Address _____
Telephone _____	Telephone _____

(For Office Use) -

Registration Fee: \$75.00 (check payable to St. James the Apostle Church)

Date Paid: _____ **Amount Paid:** _____