



RCIC Information Form

OFFICE INFORMATION

(Top OFFICE INFORMATION section to be filled out by office)

(Applicant fills out General Information section below)

Name:

Category:

Date:

Sacraments needed:

Baptismal certificate on file: YES NO NA

GENERAL INFORMATION

NO INITIALS PLEASE

Name (first, middle, last):

Address:

Date of Birth:

Age:

Place of Birth:

School Attending:

Grade:

Best telephone # to call:

Email Address:

Do you check your email regularly?

Other children in the family:

Name	Age	Baptized	Grade
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Does your child reside with birth mother and father?

If not, with whom does your child reside?

Does this person have legal custody?

MOTHER’S INFORMATION

Mother’s Name (first, middle/maiden, last):

Best phone #:

Employer:

Mother’s Religion:

If Catholic, have you received First Eucharist and Confirmation?

Any needs:

FATHER’S INFORMATION

Father’s Name (first, middle, last)

Best phone #:

Employer:

Father’s Religion:

If Catholic, have you received First Eucharist and Confirmation?

Any needs?

STEP-PARENT'S INFORMATION

Name (first, middle last):

Best phone #:

Employer:

Step-parent's Religion:

Name that child calls his/her step-parent:

How many years has step-parent been involved in this child's life?

CHILD'S INFORMATION

1. Is your child baptized?

If yes, date of baptism:

If no, move to question 3

2. In what denomination was your child baptized?

Do you have access to his/her baptismal certificate?

Place of Baptism:

Address:

Age of Baptism (*approximate*):

3. Additional Information:

Does your child have any on-going medical problems?

Does your child have any allergies to food?

Does your child like regular school?

Does your child have special learning needs?

Does your child have any discipline problems at school?

What are your child's hobbies?

Comments:

Do we have permission from both parents for your child to begin this formation in the Catholic faith?

Parent Signature: _____

If filling out online, can sign at the first parent meeting