

St Nicholas Children's R.C.I.A Registration

Please Print Legibly

A copy of your Baptismal Certificate issued in the past 6 months is required.

Full Name _____ Age _____

Address _____

E-mail _____

Phones: Home _____ Cell _____ Work _____

Date of Birth _____ City and State of Birth _____

Father's Full Name _____

Mother's Full Name _____

Mother's Full Maiden Name _____

Are your parents (of the child in RCIA) registered at St Nicholas Church Yes No

Have you been baptized in the Catholic Church? Yes No

Baptismal Church _____

Address _____

City, State, Zip _____

CIRCLE the sacraments you are interesting in receiving in the Catholic Church.

BAPTISM

CONFIRMATION

RECONCILIATION

FIRST EUCHARIST

For Office Use

Baptism Certificate _____ Catechumen _____ Candidate _____ POF _____

Sponsor's Full Name _____ Sponsor Letter _____

Sacraments to Receive: Baptism Reconciliation Eucharist Confirmation

PDS # _____