

Adult Sacrament Preparation Registration

			Today's Date:	
Name: First	_ Middle:		_Last:	
Maiden Name (if applicable):				
Date of Birth:	Age	:		
Place of Birth:				
Name of Mother:				
Name of Father:				
Contact Information				
Full Mailing Address:				
 Phone (home):		_Phone (cell): _		
Email:				
Occupation:				
Previous Religious History				
What, if any, is your present religi	ous affiliation? _			
Have you ever been baptized?	Yes		_No	Not Sure
If you answered "Yes" above, please provide the following information:				
In what denomination were	e you baptized?			

Place of Baptism (name of church): ______

If you were baptized Catholic, circle those sacraments you have already received:

Reconciliation

First Eucharist

Confirmation

Current Marital Status

Check the appropriate statement(s) below and provide any information requested beneath each statement.

- _____1. I have never been married.
- _____ 2. I am engaged to be married.
- (a) Your fiancé(e)'s Name: _____ (b) Your fiancé(e)'s Current Religious Affiliation: (c) For You: This is my first marriage. I have been married before. (d) For your fiancé(e): This is his/her first marriage. My fiancé(e) has been married before. 3. I am married. (a) Your spouse's Name: (b) Your spouse's Current Religious Affiliation: (c) For You: This is my first marriage. I have been married before. (d) For your spouse: This is my spouse's first marriage. My spouse has been married before. (e) Date of Marriage: (f) Place of Marriage: (g) Officiating Authority of Marriage: (civil government, non-Christian minister, Catholic cleric)
- _____4. I am married, but separated from my spouse.
- _____5. I am divorced and I have not remarried.
- _____6. I am a widow/widower and have not remarried since my spouse's death.