

CHRIST OUR KING CATHOLIC CHURCH
Mount Pleasant, SC
2011~2012 RCIA FORM

Candidate Name:			
Last	First	Middle	
Address:			SC
Street or PO Box	City	State	Zip
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Home Phone	Cell Phone	Work Phone	
Email Address:		Place of Employment:	
Date of Birth:		Place of Birth:	
Father's Full Name:			
Mother's Maiden Name:			
Have you ever been Baptized? <input type="checkbox"/> YES <input type="checkbox"/> NO			
If "YES" please give name and denomination of Church:			
Date of Baptism:			
Address of Church:			
Name of Godparents or Sponsors:			
Please provide a copy of your baptismal certificate with this form.			
Have you received any other sacraments? If "YES" please list name of sacrament, date you received and name of Church below:			
Sacrament	Date Received	Name of Church where you received sacrament	
Sacrament	Date Received	Name of Church where you received sacrament	
Are you registered in Christ Our King parish? <input type="checkbox"/> YES <input type="checkbox"/> NO			
If you have a Sponsor please know they must be Catholic and in good standing with the Catholic Church print name below.			
Name of Sponsor if applicable			
			Please complete back
⇨			

PERSONAL INFORMATION

Never Married - Please skip down to last section of this page.

Presently Engaged for the first time - Please skip down to the engaged section of this page.

Married Only Once Presently Separated

Divorced and Not Remarried Divorced and Remarried

If you, your spouse or your fiancè have been previously married please make an appointment with Sr. Donna at 971-8273 or Deacon Andre` by contacting the Parish Office at 884-5587.

Are you presently involved in the annulment process? YES NO

If divorced and remarried, do you have an annulment? YES NO

If married, were you married in a Catholic Church? YES NO

Name and address of parish:

Date of Marriage:

Were you married in another Christian Church? YES NO

Name and denomination of Church:

Date of Marriage:

Were you married in a civil ceremony? YES NO

What city and state?

Date of Marriage:

If married, spouses name:

Is your spouse Catholic? YES NO Has your spouse ever been baptized? YES NO

Name and location of Church:

Does your spouse have a previous marriage? YES NO

If engaged, give your fiancè/ee's full name:

Does your fiancè/ee have a previous marriage? YES NO

If yes, has this marriage been annulled? YES NO

Which one of these statements best describes why you are interested in the RCIA program:
_____ I want to know more about the Catholic Church.
_____ I think I want to become a Catholic.