

ST. MARY'S ROMAN CATHOLIC CHURCH
Rite of Christian Initiation for Children
(R.C.I.C.)
GENERAL INFORMATION FORM FOR INQUIRY

Date: _____

Child's Full Name: _____ Home Phone: _____

Address: _____ Postal Code: _____

School: _____ Grade: _____

Place of Birth: _____ Date of Birth: _____

Father's Full Name: _____ Father's Religion: _____

Mother's Given & Maiden Name: _____ Mother's Religion: _____

Catholic Parent(s) Baptized: Name of Church _____ Location of Church _____

Catholic Parent(s) : First Eucharist No Yes First Reconciliation No Yes Confirmation No Yes

E-mail address _____

MARITAL STATUS of PARENTS:

Date of marriage: _____ Church or Civil Ceremony _____

City/Province: _____

FAMILY:

Siblings Names:	Date of Birth	Baptized?	In Which Faith?
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you presently attend church No Yes Weekly Monthly Occasionally