

Our Lady of Mercy Catholic Church Religious Education

322 S. Vermont Ave., Mercedes, Texas 78570 Parish Office (956) 565-1141 / Fax (956) 565-1640 Email: olm@cdob.org or pcl-olmmercedes@cdob.org

ADULT - RCIA REGISTRATION QUESTIONAIRE

STUDENT LAST NAME	STUDENT FIRST NAME	STUDENT N	STUDENT MIDDLE NAME	
ADDRESS	CITY	STATE	ZIP CODE	
DATE OF BIRTH: / / MM DD YYYY	AGE:	SEX: 🗌 MALE		
WHICH SACRAMENTALS ARE YOU NEE	DING: 🗌 BAPTISM	🗌 FIRST RE	☐ FIRST RECONCILIATION	
			CONFIRMATION	
Please check ALL statements that	at apply to you:			
I am Married	🗆 I am e	I am engaged		
\Box I was married by a Priest	🗆 I am s	I am separated		
\Box I was not married by a Priest	\Box I have been married only once			
I am not Married	am not Married 🛛 🗌 I am Di		ivorced, but not Remarried	
I was Married before	🗌 I am D	I am Divorced and Remarried		
I have never been Married		n a relationship w	ith someone and	
\square I am married by tribunal/Justice of the Peace only		we are: not married living together will be married before May of this year		
Spouse or Fiancé				
Does your spouse/Fiancé have the foll	owing sacraments?			
Baptism First Reconciliation	on 🛛 🗌 First Communio	n 🗌 Confi	rmation	
If you have children at home, please li	st the names and ages of chi	dren:		