

Information Form

The Order of Christian Initiation of Adults -
OCIA St. Francis Xavier Catholic Church
Fort Myers, Florida 33901

Information is held in confidence and is not shared without your permission.

Today's Date: _____

Name: First: _____ Middle: _____ Last: _____

Date of Birth: _____ Place of Birth (City, State, Country, if not USA): _____

I. Contact Information

Mailing Address: _____ Apt: _____

City: _____ State: _____ Zip: _____

Phone: (Daytime) _____ (Evening/Weekend) _____

Cell Phone: _____ Occupation: _____

E-mail (home) _____ (Other) _____

II. Religious Information

1. What, if any, is your present religious affiliation? _____

2. Have you ever been baptized? Yes No I am not sure.

If you answered "Yes" to Question 2, please provide the following information:

(a) In what denomination were you baptized? _____

(b) Date or your approximate age when you were baptized: _____

(c) Place of Baptism (Church/ denomination): _____

(d) Address, if known: _____

(e) City and State, if known; Country if not USA: _____

3. If you were baptized as a Catholic, check those sacraments you have already received:

Reconciliation (Confession)

Eucharist (First Communion)

Confirmation

Continued on reverse side.

III. Current Marital Status

Check all that apply and provide any information requested beneath the statements.

1. I am single and 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 (if any): _____

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.

3. I am married.

a. Your spouse's name: _____

b. Your spouse's current religious affiliation (if any): _____

c. For you. This is my first marriage. I have been married before.

d. For your spouse. This is his/her first marriage. My spouse has been married.

e. Date of marriage: _____

f. Place of marriage: _____

4. I am married, but separated from my spouse.

5. I am divorced and have not remarried.

6. I am a widow/widower.

IV. Family Information

List the name(s) of any children 18 or under) or other dependents.

Relationship: _____ Name: _____ Age:

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Relationship: _____ Name: _____ Age:

Relationship: _____ Name: _____ Age:

V. Other Information: (annulments, spouse widow or widower, etc.)
