SACRAMENTAL PREPARATION FOR ADULTS REGISTRATION FORM

(Baptism, Confirmation, Eucharist)

St. John the Apostle Parish

Please print.

Name: _____
First Middle Last

Address: _____
Street Apt.

_____
City Zip

Phone Number: _____ Cell _____ Home _____ Text okay?: Yes _____ No _____

Email Address: _____

Date of Birth: _____ City of Birth: _____ Age: _____

Father's Name: _____ Mother's Name (Maiden): _____

Are you currently: Single _____ Married _____ Widowed _____ Divorced _____

If single, have you ever been married? Yes _____ No _____ If divorced, have you remarried? Yes _____ No _____

If married, is this your first marriage? Yes _____ No _____ If married, civilly or in a church? _____

BAPTISM

Have you been baptized? _____ In what religion? _____

Date of Baptism: _____

Place of Baptism: _____
Church City State Country

EUCHARIST

Have you received your first Holy Communion? _____

Date of First Communion: _____

Church: _____
City State Country

CONFIRMATION: Do you want to be confirmed? _____

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To receive First Eucharist and Confirmation, you must submit proof of your Baptism (baptismal certificate).

To be confirmed, you must submit proof of your Baptism (baptismal certificate) and First Eucharist.