

SAINT PETER'S CATHOLIC CHURCH

ENQUIRY FORM

RITE OF CHRISTIAN INITIATION

Please complete the form using block capitals

FULL NAME				
ADDRESS	Postcode: Telephone: Mobile:			
EMAIL				
PRESENT SACRAMENTAL SITUATION (tick as appropriate)	I am a baptised Roman Catholic			<input type="checkbox"/>
	I am a baptised and confirmed Roman Catholic			<input type="checkbox"/>
	I am a baptised Christian			<input type="checkbox"/>
	I am not baptised			<input type="checkbox"/>
Baptism Details	Name/Address of Church of Baptism:		Date of Baptism:	
	Denomination:		Baptism Certificate Supplied: Yes/No	
MARTITAL STATUS (tick as appropriate)	Married	Engaged	Single	Widow/ Widower
	Separated	Living with partner	Divorced	Divorced living partner/remarried
	Full Name of Husband/Wife/Partner:			
	If married please give date/where:			
YOUR THOUGHTS AT THE MOMENT ARE (tick as appropriate)	I want to become a Catholic	I think I might want to become a Catholic	I would like to know more about the Catholic Faith then decide what I want	I am a Catholic but have not had much contact with the Church
MY CATHOLIC SPONSOR WILL BE (sponsor must be Catholic and aged 16+)	Name:		Address:	
	Telephone:		Postcode:	

