

4807 Staunton Avenue, S.E. Charleston, WV 25304 Phone: 304.925.2836 Fax: 304.205.7985

OCIA Registration

Adult Inquirer Information Form

The information on this form is held in confidence and is not shared without your permission.

Today's Date:				
Name: First:	_Middle:	Last Name:		
Maiden Name (if applicable):				
Date of Birth:	_ Age:	Place of Birth:		
Name of Father:				
Name of Mother:				
I. CONTACT INFORMATION				
Full Mailing Address:				
Phone: (Daytime)		Mobile Phone:		
Occupation:		Email:		
II. RELIGIOUS HISTORY				
1. What, if any, is your present	religious aff	filiation?		
2. Have you ever been baptized	J? Yes	S No I am not sure		
If you answered "Yes" to Questi	ion 2, please	provide the following information:		
(a) In what denomination were you baptized?				
(b) Date or your approxi	mate age wł	nen you were baptized:		
(c) Baptismal name (if di	fferent from	o current name):		
(d) Place of Baptism (nai	me of church	n/denomination):		
(e) Address, if known:				
		vn, city, country, etc.), region (state, province, territory, etc.) and country)		
3. If you were baptized as a Cal		those sacraments you have already received:		

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III. CURRENT MARITAL STATUS

Check the appropriate statement(s) below and provide any information requested beneath each statement.

1. 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 marriag	e. I have been married before.			
(d) For your fiancé(e): 🗌 This is his/h	er first marriage. 📃 My fiancé(e) has been ma	rried before.		
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 my spouse's first marriage. My spouse has been married before.				
(e) Date of Marriage:				
(f) Place of Marriage:				
(g) Officiating Authority of Marriage:				
4. I am married, but separated from my spouse.				
5. I am divorced and I have not remarried.				
6. I am a widow/widower and have not remarried since my spouse's death.				
IV. FAMILY INFORMATION				
List the name(s) of any children or other dependents (e.g., Daughter – Lisa; Stepson – Mark).				
Relationship:	Name:	Age:		
Relationship: I	Name:	Age:		
Relationship: I	Name:	Age:		
Relationship: I	Name:	Age:		

V. GENERAL QUESTIONS

1. What or who has led you to want to know more about the Catholic Faith?

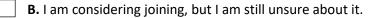
2. Please describe the types of religious education you have received, as a child and as an adult.

3. What contact have you had with the Catholic Church to date?

4. What are some of the questions or concerns you have about the Catholic Church?

5. At this point in time, which of the following statements best describes your present feelings and thoughts about the possibility of joining the Catholic Church? (please check one)

A. I need much more information about the Catholic Church before I would consider joining.



C. I am fairly sure that I would like to join, but I still need some time to study and pray about it.

D. I am fairly sure that I want to join the Catholic Church.

Please return this completed form to the Parish Office in Person, or E-mail to: stap1101char@dwc.org; or mail to St. Agnes Parish, 4807 Staunton, Ave S.E., Charleston, WV 25304.