St. Patrick Catholic Church



SIGN UP & PARTICIPANT INFORMATION

Name:		Today's date:	_
Address:			_
Phone: (H)	(W)	(C)	_
Email (required):			_
Religion (if any):		Age:	_
SACRAMENTAL HISTORY:			
Have you been baptized	d?YesNo		
	lenomination were you bapti pe of church, i.e., Catholic, Method	tized?odist, etc.)	_
If you are married, was	your spouse baptized in the	e Catholic Church?YesNo	
Have you received First	Holy Communion in the Cat	tholic Church?YesNo	
Have you been Confirm	ed in the Catholic Church?	YesNo	
Your Marital Status (check	all that apply):	Spouse's Marital Status (check all that apply)):
Marriage wMarriage wPrevious spMore than	Catholic Church remarried d olic Church Catholic Church	·	
Are you considering becom	ing a member of the Catholic	Already ic Church?YesNoCatholic	
If you are already Catholic,	are you interested in receivir	ing a Sacrament (i.e., Confirmation)?Yes	No
Do you have any special que	estions/concerns?		_