



Date: _____

OCIA Adapted for Families Registration Form

Gender: M F

Name: _____
First Name Middle Name Last Name

Date of Birth: _____ Place of Birth: _____
year month day City & Province

Mother: _____
First Name Maiden Name

Roman Catholic
Baptized Confirmed
 Other: _____

Father: _____
First Name Family Name

Roman Catholic
Baptized Confirmed
 Other: _____

Additional Information:

School Attending: _____

Grade: _____ Teacher: _____

Mailing Title (eg. John & Ann Smith) _____

Mailing Address _____
Street City/Town Postal Code

Home Phone Number _____

Day Phone Number _____

E-mail Address _____

Language (s) spoken _____

Roman Catholic Godparent(s) (To be a godparent is a ministry within the Catholic Church– you may choose to have either 1 or 2 Roman Catholic godparents for your child.)

Roman Catholic

Godmother: _____
First Name Last Name

Roman Catholic

Godfather: _____
First Name Last Name

Christian Witness [Optional– You may have one Roman Catholic godparent and a Christian Witness for your baby's baptism. A Christian Witness is a non-Catholic baptized Christian who serves as a witness to your baby's baptism in addition to one or two Roman Catholic godparent(s).]

First Name Family Name Religion