

ST LEO THE GREAT CATHOLIC CHURCH

RCIA REGISTRATION FORM		DATE:
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CANDIDATE'S NAME: (LAST , FIRST, MI)	DATE OF BIRTH:	HOME TELEPHONE:
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MAILING ADDRESS:	WORK TELEPHONE:
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EMAIL ADDRESS:	CELL PHONE:
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RELIGION BAPTIZED IN:		LAST RELIGIOUS EDUCATION LEVEL COMPLETED:
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ARE YOU CURRENTLY MARRIED?	DATE MARRIED:	CITY & STATE MARRIED IN:
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SPOUSE'S NAME?	ARE YOU A REGISTERED MEMBER OF ST. LEO PARISH?
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SACRAMENTS (IF ANY) THAT YOU HAVE RECEIVED: (COPIES SHOULD BE PRESENTED)		
BAPTISM	1ST COMMUNION	CONFIRMATION

<p>QUESTIONS/CONCERNS YOU WOULD LIKE ADDRESSED AS PART OF THIS R.C.I.A. PROGRAM:</p>
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OFFICE USE ONLY: FAMILY REGISTRATION: