



ST. PAUL R.C. CHURCH
231 Second St.
CLIFTON, NJ 07011
973-340-1300 EXT. 106

RCIA (RITE OF CHRISTIAN INITIATION FOR ADULTS)

REGISTRATION FORM 2020-2021

ENGLISH

Date: _____
 Name: _____ Maiden Name (if married): _____
 First/Middle/Last
 Date of Birth: _____ Place Of Birth: _____ Age: _____
 City of Birth: _____ State of Birth: _____ Country: _____
 Current Address: _____
 City: _____ State: _____ Zip: _____
 Phone (home): _____ Phone (cell): _____ E-mail: _____

ATTACH A CURRENT FRONT AND BACK COPY OF YOUR BIRTH CERTIFICATE OBTAINED IN THE LAST 6 MONTHS

HAVE YOU BEEN BAPTIZED? ___ YES ___ NO : IF YES PLEASE PROVIDE BAPTISM INFORMATION

Date of Baptism: _____
 Church of Baptism: _____ Religious Denomination: _____
 Church Address: _____
 City: _____ State: _____ Zip: _____

*** ATTACH A CURRENT FRONT AND BACK COPY OF YOUR BAPTISMAL CERTIFICATE OBTAINED IN THE LAST 6 MONTHS ***

FIRST RECONCILIATION AND FIRST COMMUNION INFORMATION (IF CATHOLIC)

Reconciliation:
 Church Name: _____ Date: _____
First Communion:
 Church Name: _____ Date: _____

***ATTACH A CURRENT COPY OF YOUR FIRST COMMUNION CERTIFICATE ***

WHAT SACRAMENT DO YOU NEED TO RECEIVE RECEIVE?

Baptism _____ First Communion _____ Confirmation _____

If you need to be baptized and confirmed you will need 2 godparents for Baptism/ 1 sponsor for Confirmation. Your Confirmation sponsor may be one of your baptismal godparents. Your parents **CANNOT** be godparents or sponsors.

BAPTISMAL GODPARENT(S) INFORMATION

They must have received the Sacraments of Baptism, First Communion and Confirmation. They must be practicing Catholics in good standing with the Church. They must provide eligibility certificates from their local parish.

Godfather's Name: _____ Phone No.: _____
 First/Middle/Last
 Address: _____ City/State/Zip: _____
 Godmother's Name: _____ Phone No.: _____
 First/Middle/Last
 Address: _____ City/State/Zip: _____

CONFIRMATION SPONSOR INFORMATION

They must have received the Sacraments of Baptism, First Communion and Confirmation. They must be a practicing Catholic in good standing with the Church. He/she must provide a sponsor certificate from their local parish.

Sponsor's Name: _____ Phone No.: _____
 First/Middle/Last
 Address: _____ City/State/Zip: _____

*******PLEASE FILL OUT THE QUESTIONAIRE IN THE BACK*******

R.C.I.A. QUESTIONNAIRE 2020-2021

1. WHICH ONE OF THESE STATEMENTS BEST DESCRIBES WHY YOU ARE INTERESTED IN THE RCIA PROGRAM:
 - A. I THINK I WANT TO BECOME A CATHOLIC AND I WANT TO RECEIVE THE SACRAMENTS OF INITIATION:
 BAPTISM EUCHARIST CONFIRMATION
 - B. I AM GETTING MARRIED AND NEED TO RECEIVE THE SACRAMENT(S) OF:
 BAPTISM EUCHARIST CONFIRMATION
 - C. I AM 18 YEARS OLD OR OLDER AND I NEED TO BE CONFIRMED
 - D. I WANT TO KNOW MORE ABOUT THE CATHOLIC CHURCH.

2. PLEASE CHECK ANY OF THE FOLLOWING WHICH APPLY TO YOU:
 - A. _____ I AM SINGLE AND HAVE NEVER BEEN MARRIED.
 - B. _____ I AM A WIDOW / WIDOWER
 - C. _____ I AM DIVORCED AND NOT RE-MARRIED.
 - D. _____ I WAS MARRIED IN THE CATHOLIC CHURCH.
 - E. _____ I WAS NOT MARRIED IN THE CATHOLIC CHURCH.
 - F. _____ MY PREVIOUS MARRIAGE WAS ANNULLED.
 - G. _____ MY PREVIOUS MARRIAGE WAS NOT ANNULLED.

3. I AM CURRENTLY MARRIED: NO YES (IF YES, PLEASE SPECIFY)
 - A. _____ IN THE CATHOLIC CHURCH
 - B. _____ IN A CHURCH OF ANOTHER DENOMINATION
 - C. _____ CIVIL MARRIAGE (BY A JUSTICE OF THE PEACE, ETC.)
 - D. MY SPOUSE'S NAME IS: _____

4. ARE YOUR CHILDREN BAPTIZED? : NO YES
 - A. IF YES, IN WHAT FAITH? _____
 - B. IF NO, WOULD YOU LIKE THEM TO BE BAPTIZED? NO YES
 - C. THE NAMES AND AGES OF MY CHILDREN UNDER AGE 18 ARE:
NAME: _____ AGE: _____ NAME: _____ AGE: _____
NAME: _____ AGE: _____ NAME: _____ AGE: _____

5. FOR THOSE WHO ARE ENGAGED
 - A. IF ENGAGED, GIVE YOUR FIANCÉ/FIANCÉE'S FULL NAME: _____
 - B. HAS YOUR FIANCÉ/ FIANCÉE RECEIVED THE SACRAMENTS OF INITIATION? NO YES
THESE SACRAMENTS ARE: BAPTISM, EUCHARIST AND CONFIRMATION. IF YOUR FIANCÉ/ FIANCÉE HAS NOT RECEIVED THESE SACRAMENTS PLEASE BE AWARE THAT HE/SHE MUST RECEIVE THEM BEFORE YOUR CATHOLIC WEDDING.
 - C. WAS YOUR FIANCÉ/ FIANCÉE PREVIOUSLY MARRIED? NO YES
 - D. IF 'YES', HAS THIS MARRIAGE BEEN ANNULLED? NO YES (IF NO PLEASE SPEAK TO FATHER LEONARDO JARAMILLO)

6. WHAT RELIGION DO YOU CURRENTLY PRACTICE? _____

7. WHAT BRINGS YOU TO THE CATHOLIC CHURCH? _____

8. WHAT IS YOUR GENERAL IMPRESSION OF THE CATHOLIC CHURCH? _____

9. WHAT ARE YOUR EXPERIENCES OF GOD AND CHURCH IN YOUR LIFE UP TO THIS POINT?

2020-2021 CLASSES BEGIN SEPTEMBER 27, 2020
WITH THE 9:00AM MASS AT ST. PAUL R.C. CHURCH
FOLLOWED BY CLASS FROM 10:00AM -11:30AM
REGISTRATIONS WILL NOT BE ACCEPTED WITHOUT COPIES OF:
BIRTH CERTIFICATE, BAPTISMAL CERTIFICATE AND FIRST COMMUNION CERTIFICATE
ATTENTION ENGAGED COUPLES: MAKE SURE YOU PROVIDE YOUR COPIES TO THE RELIGIOUS EDUCATION OFFICE EVEN IF YOU PROVIDED YOUR COPIES TO FATHER LEONARDO JARAMILLO!!
REGISTRATION:
July 27, 2020 –AUGUST 31, 2020 FEE: \$75.00
LATE REGISTRATION: SEPTEMBER 1, 2020 –SEPTEMBER 14, 2020 FEE: \$85.00
MAKE CHECKS PAYABLE TO: ST. PAUL R.C. CHURCH; CREDIT CARDS ACCEPTED. THANK YOU!
PLEASE RETURN REGISTRATION FORM, TOGETHER WITH PAYMENT TO THE PARISH OFFICE
REGISTRATIONS WILL NOT BE ACCEPTED AFTER SEPTEMBER 14, 2020
THANK YOU!