

**Rite of Christian initiation for Adults  
St. Peter, the Apostle Catholic Church  
P.O. Box 860  
Onley, Virginia 23418**

RCIA Information Sheet

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Employer: \_\_\_\_\_

Employer: \_\_\_\_\_

Spouse: \_\_\_\_\_ Employer: \_\_\_\_\_ Phone#: \_\_\_\_\_

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What denomination do you belong to? \_\_\_\_\_ What parish church are you presently attending? \_\_\_\_\_

Are you baptized? Yes \_\_\_ No \_\_\_ if yes, Place of Baptism: \_\_\_\_\_

Date of baptism: \_\_\_\_\_

What other sacraments do you need?

Confirmation, Yes \_\_\_ No \_\_\_

Eucharist, Yes \_\_\_ No \_\_\_

Special Notations (for RCIA Team)

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Name of Sponsor:

\_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone# (Work): \_\_\_\_\_ Home: \_\_\_\_\_