

QUEEN OF ALL SAINTS CATHOLIC CHURCH

606 Woodland Ave. Michigan City, IN. 46360

219-872-9196 www.qas.org

RITE OF CHRISTIAN INITIATION OF ADULTS

Application Form

Name: _____

Address: _____

Birth Date: _____

Place of Birth: _____

Baptism (If not baptized please leave blank)

Place of Baptism: _____
Location *Address*

Date of Baptism: _____ Faith Tradition _____

Have you received any sacraments in the Catholic Church? Yes or No (Circle one)

If yes, which Sacraments have you received? (Circle those that apply)

Reconciliation (Confession)

Communion

What brought you to inquire about the Catholic Faith?

Can you describe your prayer life and relationship with God?

What questions do you have about the catholic faith tradition?

Mother _____
First Middle Last Maiden

Religion (If Christian, then include faith tradition) _____

Father _____
First Middle Last

Religion (If Christian, include faith tradition) _____

Your marriage status: (Circle all that apply) Single Married Divorced

If you are married, is it a: Civil Marriage Church Marriage (Please circle)

Where did the marriage take place? _____
Location

Date: _____ Address: _____

If you are divorced and remarried, was your first marriage a:
Civil Marriage Church Marriage (Please circle)

Phone number where you can be reached: _____

Email address: _____

Thank you for your interest in the Catholic Church.
If you have any questions please call the parish office at 219-872-9196.
We will be in touch with you soon.
God bless you!