

**CHURCH OF ST BERNADETTE**  
**12 ZION ROAD**  
**SINGAPORE 247731**  
TEL: 6737-3529 – FAX: 6737-8658

**Rite of Christian Initiation For Adults (RCIA)**  
(Registration Form for Catechumens)

Full Name \_\_\_\_\_ (Underline Surname)  
(Write in Block Letters, Name as in I/C or Passport)

Christian Name (if applicable) \_\_\_\_\_ Sex: Male / Female

Date of Birth \_\_\_\_\_ Religion (if any) \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ E-mail: \_\_\_\_\_

Telephone No \_\_\_\_\_ (H) \_\_\_\_\_ (O) \_\_\_\_\_ (Pgr/HP)

Were you baptized before? YES / NO Which Church \_\_\_\_\_

Educational Level \_\_\_\_\_ Occupation \_\_\_\_\_

Marital Status: (Not Married / Married / Married Before) \_\_\_\_\_

Name of Spouse \_\_\_\_\_ Spouse's Religion \_\_\_\_\_

Date of Marriage \_\_\_\_\_ Place of Marriage: Registry / Church

Name of Church where marriage was solemnized \_\_\_\_\_

Registry of Marriage Certificate No. \_\_\_\_\_

No. of Children \_\_\_\_\_ No. of Catholics in your family \_\_\_\_\_

**FOR BAPTISM PURPOSES**

Name of God-Father: \_\_\_\_\_ Tel No. \_\_\_\_\_

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

Name of God-Mother: \_\_\_\_\_ Tel No. \_\_\_\_\_

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

Date \_\_\_\_\_

Signature \_\_\_\_\_