

CHURCH OF OUR LADY OF GUADALUPE

Lot 8437, Jalan Industri PBP 1/2, Taman Industri Pusat Bandar Puchong, 47100 Puchong, Selangor Tel: 03-8062 1304 Fax: 03-8062 4014 Email: guadalupe@archkl.org Website: https://olgpuchong.org Parish Priest: Rev. Fr. Raymond Pereira



## **REGISTRATION FORM FOR RITE OF CHRISTIAN INITIATION FOR ADULTS (RCIA)**

	1. Personal Particulars	
Name (as in MyKad/Passport):		
MyKad no./Passport:	Nationality:	
Gender:	Profession:	
Date of birth:	Age:	
Address:		
Religion:	Email:	
Contact number:	Social media:	
Marital status: Never married Married If married fill in part 3, 4 and 5		
2. If you are a baptized Christian		
Church name:		
Place:	Denomination:	
For baptized Catholic, please tick the sacraments you have received		
Reconciliation First Holy Communion	Confirmation Others:	
3. Particulars of spouse		
Name:		
MyKad/Passport no.:	Gender:	
MyKad/Passport no.: Religion:	Gender:	
· · ·		
Religion:		
Religion: If spouse is Catholic, has she/he been married be Remarks:	fore? Yes No	
Religion: If spouse is Catholic, has she/he been married be	fore? Yes No	
Religion: If spouse is Catholic, has she/he been married be Remarks: If spouse is Catholic tick the sacraments she/he h	fore? Yes No	
Religion: If spouse is Catholic, has she/he been married be Remarks: If spouse is Catholic tick the sacraments she/he h Reconciliation First Holy Communion	fore? Yes No	
Religion: If spouse is Catholic, has she/he been married be Remarks: If spouse is Catholic tick the sacraments she/he h Reconciliation First Holy Communion 4. Details of Marriage	fore? Yes No ave received Confirmation Others: Registered in Civil registry? Yes No	
Religion: If spouse is Catholic, has she/he been married be Remarks: If spouse is Catholic tick the sacraments she/he h Reconciliation First Holy Communion 4. Details of Marriage Date of Marriage:	fore? Yes No ave received Confirmation Others: Registered in Civil registry? Yes No	
Religion: If spouse is Catholic, has she/he been married be Remarks: If spouse is Catholic tick the sacraments she/he h Reconciliation First Holy Communion 4. Details of Marriage Date of Marriage:	fore? Yes No ave received Confirmation Others: Registered in Civil registry? Yes No	

5. Details of Children			
No.	Name of children	Age Religion	
1			
2			
3			
4			
5			
6			
	5. Parent's Particulars		
Father's full name:			
Father's religion:			
Mother's full name:			
Mother's religion:			
7. Documents / Items for Submission			
<ul> <li>a. One photocopy of Inquirer's MyKad/Passport</li> <li>b. One recent passport size photograph of Inquirer</li> <li>c. Baptism certificate – for those who are already baptized</li> <li>d. Married certificate - if married</li> </ul>			
8. Sponsor's Particulars			
Name of sponsor:			
MyKad/Passport No:		Relationship:	
Address:			
Sponsor's parish:			
Contact no:		Email:	
Social media:			
9. Declaration			
I, the undersigned, do hereby declare that all the particulars disclosed above are complete and true and that the decision to inquire about the faith and / or seek baptism in the catholic church is of my own free will.			
Inqu	irer's Signature:	date	
10. Office use			
Zone	BEC:	date Coordinator informed:	