

**FORM: RCIC- (RCIA) ADAPTED FOR CHILDREN OF CATECHETICAL AGE****FOR A CHILD WHO IS TO BE BAPTIZED, CONFIRMED AND RECEIVE FIRST HOLY COMMUNION****Birth Certificate must be presented and number recorded below  
and initialed by reviewer**

We (I) the undersigned, are [am] the:

- Birth Parents**                       **Adoptive Parents**  
 **Birth /Adoptive Mother**—Do you have the legal right to have your child Baptized without the other parent's consent?  Yes  
 **Birth /Adoptive Father**—Do you have the legal right to have your child Baptized without the other parent's consent?  Yes  
 **Court appointed guardian** —Do you have sole legal right to have this child Baptized?  Yes  
 **Other:** \_\_\_\_\_ —Do you have consent of the parent(s) or guardian(s) have this child Baptized?  Yes

Birth Certificate No. \_\_\_\_\_

Initial of reviewer: **OF**

Child's Last Name:			
Given Name(s):		Gender <input type="checkbox"/> M <input type="checkbox"/> F	
Date of Birth:	Place of Birth:	Province	Country
(yyyy/mm/dd)	City/Town		

**In Case of Adoption** |Present a copy of the adoption order from the Court of Judgment.

Date :	Adoption Order No.:
(yyyy/mm/dd)	

**In Case of court appointed/permanent/private guardianship** |Present a copy of the guardianship order from the Court of Judgment.

Date :	Guardianship Order No.:
(yyyy/mm/dd)	

**Parent Information |Mother**

Maiden Name:		Given Name(s):	
Address:			
City/Town		Province	Postal Code
Date of Birth:	Date of Baptism:	Religion:	
(yyyy/mm/dd)	(yyyy/mm/dd)		
Home Phone:	Work Phone:	Cell Phone:	
Email Address:			

**Parent Information |Father**

Surname Name:		Given Name(s):	
Address:			
City/Town		Province	Postal Code
Date of Birth:	Date of Baptism:	Religion:	
(yyyy/mm/dd)	(yyyy/mm/dd)		
Home Phone:	Work Phone:	Cell Phone:	
Email Address:			



**MARITAL STATUS OF PARENTS:**

Single  Common Law  Civil Marriage  Religious Ceremony  Divorced

We [I] are [am] requesting to have this child accepted into the Rite of Christian Initiation of Adults, adapted for children, according to the Rite of the Roman Catholic Church and accept the responsibility of raising him/her in the Faith.

Signature: \_\_\_\_\_

 mother  legal guardian  other

Signature: \_\_\_\_\_

Witness

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

(yyyy/mm/dd)

Signature: \_\_\_\_\_

 mother  legal guardian  other

Signature: \_\_\_\_\_

Witness

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

(yyyy/mm/dd)

**CURRENT BAPTISMAL STATUS** **Not Baptized / Other Religion**No Religion Other Religion  \_\_\_\_\_**CHILD ACCEPTED AS:**  Catechumen**SPONSOR:**

One sponsor, male or female, is sufficient; but there may be two, one of each gender. (c.873)

The sponsor must NOT be either the father or the mother of the one to be baptized. (c.874 §1,5°)

The sponsor must have received the sacraments of Baptism, Confirmation and Communion, be a practicing Catholic, and be at least 16 years of age. (c.874)

Sponsor

_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F	Testimonial of suitability <input type="checkbox"/> Yes
Last Name	First Names		

Sponsor

_____	_____	<input type="checkbox"/> M <input type="checkbox"/> F	Testimonial of suitability <input type="checkbox"/> Yes
Last Name	First Names		

**OFFICE USE ONLY****Permission granted to have this child receive the Sacraments of Initiation:**

Baptism  Profession of Faith  Confirmation  First Holy Communion

**Sacramental Preparation date** (yyyy/mm/dd)**Place****Parish of Sacraments of Initiation** (Name, City/Town):**Date of Sacraments of initiation** (yyyy/mm/dd):**Pastor** (Signature)**Parish** (Name, City/Town)**Date** (yyyy/mm/dd):