Youth- OCIA Inquiry

Date: _____

Name: _____ Date of Birth:_____

Grade: _____ School:_____

E-mail: _____ Phone: _____

Address: _____City:_____ Zip: _____

Place of Birth: _____ Father's Name: _____

Mother's Name & (Maiden Name): _____ phone:_____

Parent info: email _____

Are your parents registered members of St Jude? : _____

Sacraments

Religion of Baptism: _____ Date of Baptism: _____ ☐ **NONE**

☐ *Baptismal Certificate or other proof of baptism received*

Name of Church: _____ City & State: _____

Present/Most Recent Religion: _____

If baptized Catholic, other Sacraments already received are:

☐ Eucharist ☐ Reconciliation ☐ Confirmation ☐ Matrimony

Parent's Marital Status *(choose all that apply)*

☐ Single ☐ Divorced ☐ Widowed ☐ Married-Civil ☐ Married-Religion (which faith):

Parent/Guardian's Religion: _____

Sacraments received: _____

Siblings (name & age): _____ 2) _____

3) _____ 4)_____

Sacraments received: _____

Getting to Know Your Journey

1.What or who has led you to want to know more about the Catholic Faith?

2. What are some of the questions or concerns you have about the Catholic Church?

3. Describe the types of religious education in which you have participated.

4. Please summarize the reason(s) you desire to begin the Christian initiation process: