



Saint Bernard

A Roman Catholic Community

9647 Beach Street, Bellflower, CA 90706
Phone: (562) 867-2337 • office@saintbernardcc.org

Name / Address / Telephone

Date : _____

Last Name

First Name

Middle Name

Phone (Home)

Work

Cell

Address

City

Zip Code

Date of Birth

Place of Birth

Email

Name of Father

Name of Mother

Your Occupation

Marital Status:

Single

Married

Separated

Divorced

Widowed

Living Together

If Married:

What is the name of your spouse?

Were you married civilly?

Were you married in the Church?

If Yes, What is the name of the Church?

City, State

Sacraments:

Please indicate what Sacraments you wish to receive?

Baptism

Eucharist

Confirmation



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Were you previously Baptized?

If Yes, What is the name of the church?

City, State

Do you have sponsor(s) [Name(s)] _____

Comments:

Name _____

Phone No. _____ Email _____

1. Have you ever had religious education? How many years? _____
Which Church? _____
2. Do you regularly attend Sunday Mass?
_____ Yes _____ No _____ Sometimes _____ Never
3. What are your reasons for attending RCIA?
4. How did you learn about our RCIA program? Who referred you to this parish?



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5. Do you own a Bible?
6. Do you have a sponsor? _____ Yes _____ No
7. Do you have a particular question you want answered in this program?
Please describe.

8. What are your expectations in this program?