

Good Shepherd Catholic Church OCIA Program

OCIA Registration Form 2025

Information on this form is held in confidence and is not shared without your permission

Date: _____

NAME First: _____ Middle: _____ Last: _____

Maiden Name (if applicable): _____ Date of Birth: _____

Place of Birth: _____
(Include town or city/ province or county and country)

Name of Father: _____

Name of Mother (name at birth): _____

CONTACT INFORMATION

Mailing Address: _____
Street City State Zip Code

Phone (Daytime): _____ (Evening/Weekend): _____

Cell/Mobile Phone: _____ Occupation: _____

Email (Home): _____ Other: _____

RELIGIOUS HISTORY

1. What, if any, is your present Religious affiliation _____

2. Have you ever been baptized? Yes No I am not sure

If yes to Question #2, please provide the following information:

(a) In what denomination? _____

(b) Baptismal name (if different from current name) _____

(c) Place of Baptism: _____

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(d) Address or Location, if known: _____

3. If you were baptized as a Catholic, check those sacraments you have already received:

Reconciliation (Confession)

Eucharist (First Communion)

CURRENT MARITAL STATUS

Check the appropriate statement(s) below and provide any information requested.

I have never been married.

I am engaged to be married. (For engaged couples only. If you are currently married proceed to Question no. 3)

(a) Your Fiancé(e)'s Name: _____

(b) Your Fiancé(e)'s Current Religious Affiliation (if any): _____

(c) For You This is my first marriage I have been married before

(d) For Your Fiancé(e): This is her/his first marriage My Fiancé(e) has been married before.

I am currently married.

(a) Your Spouse's Name: _____

(b) Your Spouse's Current Religious Affiliation (if any): _____

(c) **For You:** This is my 1st marriage I have been married before

 a Previously Married to: _____

 b Date & Place of Marriage: _____

(d) **For Your Spouse:** This is my spouse's 1st marriage My spouse has been married before.

 a Previously Married to: _____

 b Date & Place of Marriage: _____

I am married, but separated from my spouse.

I am divorced and I have not remarried.

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I am a widow/widower and have not remarried since my spouse's death.

FAMILY INFORMATION

List the name(s) of any children or other dependents (e.g. Daughter – Jane; Stepson – John)

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

PREVIOUS MARRIAGE INFORMATION

I.

Section 1. PREVIOUS MARRIAGE(S) OF AN INQUIRER

NAME OF INQUIRER: _____

PREVIOUS MARRIAGE (FIRST SECOND THIRD) TO: _____

First: _____ Middle Name: _____ Last: _____

a. BAPTIZED? YES OR NO

b. IF BAPTIZED, RELIGIOUS AFFILIATION: _____

c. DATE OF MARRIAGE: _____

d. PLACE OF MARRIAGE (PLEASE INCLUDE TOWN/CITY/COUNTY/STATE. IF MARRIED OUTSIDE OF THE U.S., PLEASE INCLUDE PROVINCE, ETC.): _____

e. OFFICIATING AUTHORITY OF MARRIAGE: (PLEASE INDICATE CIVIL GOVERNMENT, NON-CHRISTIAN MINISTER, CATHOLIC CLERIC.) _____

f. HAVE YOU OR YOUR FORMER SPOUSE EVER PETITIONED FOR A DECREE OF NULLITY FROM A TRIBUNAL OF THE CATHOLIC CHURCH? NO YES

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g. A PETITION IS CURRENTLY IN PROCESS:(1) DIOCESE _____

(2) CASE NO.: _____ (3) DECREE OF NULLITY? _____

NAME OF INQUIRER: _____

PREVIOUS MARRIAGE (FIRST SECOND THIRD) TO: _____

First: _____ Middle Name: _____ Last: _____

a. BAPTIZED? YES OR NO

h. IF BAPTIZED, RELIGIOUS AFFILIATION: _____

i. DATE OF MARRIAGE: _____

j. PLACE OF MARRIAGE (PLEASE INCLUDE TOWN/CITY/COUNTY/STATE. IF MARRIED OUTSIDE OF THE U.S., PLEASE INCLUDE PROVINCE, ETC.): _____

k. OFFICIATING AUTHORITY OF MARRIAGE: (PLEASE INDICATE CIVIL GOVERNMENT, NON-CHRISTIAN MINISTER, CATHOLIC CLERIC.) _____

l. HAVE YOU OR YOUR FORMER SPOUSE EVER PETITIONED FOR A DECREE OF NULLITY FROM A TRIBUNAL OF THE CATHOLIC CHURCH? NO YES

m. A PETITION IS CURRENTLY IN PROCESS:(1) DIOCESE _____

(2) CASE NO.: _____ (3) DECREE OF NULLITY? _____

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2. PREVIOUS MARRIAGE(S) OF AN INQUIRER'S FIANCÉ(E)/SPOUSE

NAME OF INQUIRER's Fiance(e) Spouse:

PREVIOUS MARRIAGE (FIRST SECOND THIRD) TO: _____

First: _____ Middle Name: _____ Last: _____

a. BAPTIZED? YES OR NO

b. IF BAPTIZED, RELIGIOUS AFFILIATION: _____

c. DATE OF MARRIAGE: _____

d. PLACE OF MARRIAGE (PLEASE INCLUDE TOWN/CITY/COUNTY/STATE. IF MARRIED OUTSIDE OF THE U.S., PLEASE INCLUDE PROVINCE, ETC.): _____

• OFFICIATING AUTHORITY OF MARRIAGE: (PLEASE INDICATE CIVIL GOVERNMENT, NON-CHRISTIAN MINISTER, CATHOLIC CLERIC) _____

• HAVE YOU OR YOUR FORMER SPOUSE EVER PETITIONED FOR A DECREE OF NULLITY FROM A TRIBUNAL OF THE CATHOLIC CHURCH? NO YES

• A PETITION IS CURRENTLY IN PROCESS:

○ (1) DIOCESE: _____

○ (2) CASE No.: _____

○ (3) DECREE OF NULLITY? _____

DOCUMENT CHECK LIST:

- Birth Certificate
- Baptismal Certificate with Notations (issued within last 6 months)
- Marriage License(s) and Certificate (s)
- Notice of Entry of Judgment and Judgement (Civil Nullity)
- Certificate of First Holy Communion
- Registration Fee of \$75.00