

No.

Date:



church of
st. **IGNATIUS**
Singapore

R. C. I. A.

Inquirer

Name: _____

Name in I/C (if different from above): _____

Marital Status: _____ Sex: Male / Female

City or place of birth: _____ Date of Birth: _____ Age: _____
(DD / MM / YY)

Address: _____

_____ Singapore: _____

Phone: (Home) _____ (Office) _____ (Mobile) _____

Email Address: _____

Occupation: _____

If still studying, where? _____

What is your religious background? _____

Have you ever been baptised? Yes / No

If so, in which church? _____

How do you come to know of this RCIA course? _____

Do you have a Sponsor Yes / No. Name of Sponsor: _____
(Please fill out a separate Sponsor form)

Remarks _____

or's Form)
