**Rite Of Christian Initiation Of Adults (RCIA)**

**Application Form For inquirer**

***Please complete fully in BLOCK LETTERS****.*

**The RCIA Sessions will start on Tuesday 3 July 2018**

**Time : 7:30pm to 10pm**

**Location: Novena Church**

 **300 Thomson Road, Singapore 307653**

**\*\* Please submit by Thursday 31 May 2018 \*\***

|  |  |  |
| --- | --- | --- |
| Full Name *(Underline surname)* | : |  |
| Address |  |  |
| Home / OfficeTel. No. | : |  | Mobile Phone No. | : |  |
| Email | : |  |
| Gender | : | 🞏 Male 🞏 Female | Occupation | : |  |
| NRIC/Passport No. | : |  |  |  |  |
| Date of Birth *(Day/Month/Year)* | : |  | Religion | : |  |
|  |
| Marital Status | : | 🞏 Single 🞏 Engaged 🞏 Married🞏 Separated 🞏 Divorced 🞏 Widow/Widower |
| If ‘married’, ‘separated’, or ‘divorced’, please state Spouse/Ex-spouse’s: |
| Name | : |  | Religion | : |  |
| Married at | : | 🞏 Registry of Marriage | Country/Date | : |  |
| 🞏 Church | Name of Church | : |  |
| If ‘single’, ‘engaged’, ‘divorced’, or ‘widow/widower’, do you intend to marry within the next  |
| year? 🞏 Yes 🞏 No | Religion of Fiancé / Fiancée | : |  |
|  |
| Have you ever attended a RCIA Journey? 🞏 Yes 🞏 No |
| Have you been baptised? 🞏 Yes 🞏 No |
| If Yes, | Date/Year Baptised | : |  | Denomination | : |  |
| Where/Name of Church |  |
|  |

|  |
| --- |
| I understand and give consent to Novena Church to contact me with the contact number I provided in this application form.I am aware that I may withdraw my consent provided by me anytime by writing to Novena Church by mail or email at RCIAnovena@gmail.com. |
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Signature of Applicant Date

|  |
| --- |
|   |
| For Official Use :  |
|  |
| Date | : |  | Personnel | : |  |  |
| Remarks | : |  |

Call History

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Date |  |  |  |  |  |  |  |  |
| Time |  |  |  |  |  |  |  |  |
| Remarks |  |  |  |  |  |  |  |  |