

1330 Sunshine Ave. Leesburg, FL 34748 352-787-6354 • Fax 352-787-5971 email info@ccstpaul.com • www.ccstpaul.com

Last Name: (Maiden Name	ame):
First Name: Middle N	lame:
Place of Birth:	Date of Birth:
(City, State, Country)	
Father's Full Name:	His Religion:
Mother's First & <u>Maiden</u> Name:	Her Religion:
CONTACT INFORMATION	
Address:	Home Phone:
City: State: Zip:	Cell Phone:
E-mail address: Student? ((Y / N) School:
RELIGIOUS HISTORY	
Do you hold membership in a church? Name of church	ch?
Location of Church:	Denomination:
(City, State, Country)	
Have you been baptized? Date of Baptism:	Age at Baptism:
Name of Baptismal Church	Denomination:
(City, State, Country) [Please include a copy of your baptism certificate]	
Please check off all of the following that apply:	
I definitely want to become a catholic.	
I think I might want to become a catholic.	
I just want to learn more, but don't want to join.	
I've been attending the Catholic Church for some	time.
I know someone catholic who has influenced me	
I am married to a catholic and want to share the s	same faith.
I am engaged to a catholic and want to share the	same faith.
I was recently active in another Christian church,	but am looking for more.
	me, but am searching for some place to belong
I haven't been involved in any church for a long ti	
I haven't been involved in any church for a long ti I was baptized protestant long ago, but never acti	-
-	ive in any church.