



# SAINT PAUL CATHOLIC COMMUNITY

1330 Sunshine Ave.  
Leesburg, FL 34748  
352-787-6354 • Fax 352-787-5971  
email [info@ccstpaul.com](mailto:info@ccstpaul.com) • [www.ccstpaul.com](http://www.ccstpaul.com)

For **ADULTS** seeking baptism or profession of faith in the Catholic Church Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ (Maiden Name): \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
(City, State, Country)

Father's **Full** Name: \_\_\_\_\_ His Religion: \_\_\_\_\_

Mother's First & **Maiden** 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? \_\_\_\_\_

Location of Church: \_\_\_\_\_ Denomination: \_\_\_\_\_  
(City, State, Country)

Have you been baptized? \_\_\_\_\_ Date of Baptism: \_\_\_\_\_ Age at Baptism: \_\_\_\_\_

Name of Baptismal Church \_\_\_\_\_ Denomination: \_\_\_\_\_

Location of Baptismal Church: \_\_\_\_\_  
(City, State, Country)

**[Please attach 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 into coming at this time.
- I am married to a catholic and want to share the 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.
- I haven't been involved in any church for a long time, but am searching for some place to belong
- I was baptized protestant long ago, but never active in any church.
- I was baptized catholic and want to complete initiation (Receive Eucharist and Confirmation)

Are there any specific interests or questions you have at this time? \_\_\_\_\_

Please return completed form to Jeff Falanga at [jfalanga@ccstpaul.com](mailto:jfalanga@ccstpaul.com), or mail to the above address.

**MARRIAGE AND FAMILY INFORMATION**

**YOUR MAIDEN NAME** *(If Applicable)* \_\_\_\_\_

*Check the one that Applies to you:*

- |                                        |                                                     |                                        |
|----------------------------------------|-----------------------------------------------------|----------------------------------------|
| <input type="checkbox"/> NEVER MARRIED | <input type="checkbox"/> SEPARATED                  | <input type="checkbox"/> WIDOW/WIDOWER |
| <input type="checkbox"/> MARRIED ONCE  | <input type="checkbox"/> DIVORCED BUT NOT REMARRIED |                                        |
| <input type="checkbox"/> ENGAGED       | <input type="checkbox"/> DIVORCED AND REMARRIED     |                                        |

**NAME OF PRESENT SPOUSE OR FIANCÉ** *(Maiden Name if Applicable)* \_\_\_\_\_

**FIANCÉ:**

- NEVER MARRIED BEFORE  
 DIVORCED  
 PREVIOUS MARRIAGE ANNULLED

**SPOUSE:**

- MARRIED ONCE  
 DIVORCED AND REMARRIED  
 PREVIOUS MARRIAGE ANNULLED

**SPOUSE/FIANCÉ'S RELIGION** \_\_\_\_\_ **BAPTIZED?** \_\_\_\_\_ **ACTIVE IN THAT RELIGION?** \_\_\_\_\_

**WAS PRESENT MARRIAGE BY:** JUSTICE OF PEACE \_\_\_\_\_ MINISTER \_\_\_\_\_ CATHOLIC PRIEST \_\_\_\_\_

**DATE OF THIS WEDDING** \_\_\_\_\_ **CHURCH/SETTING:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**EXCLUDING YOUR PRESENT MARRIAGE (OR ANTICIPATED MARRIAGE)**

*IF YOU HAVE BEEN PREVIOUSLY MARRIED:*

**TO WHOM:** *(Please include Maiden Name)*

**PLACE OF MARRIAGE:** *(Church/Setting, City and State)*

- |          |       |
|----------|-------|
| #1 _____ | _____ |
| #2 _____ | _____ |
| #3 _____ | _____ |

**DATE OF MARRIAGE:**

*(Month/Day/Year)*

**MARRIAGE BY:**

*(Priest/Minister/Justice of Peace)*

**HOW MARRIAGE ENDED:**

*(Death/Divorce/Annulment)*

**DATE ENDED:**

*(Month/Day/Year)*

- |          |       |       |       |
|----------|-------|-------|-------|
| #1 _____ | _____ | _____ | _____ |
| #2 _____ | _____ | _____ | _____ |
| #3 _____ | _____ | _____ | _____ |

**ANNULMENT IN PROCESS** \_\_\_\_\_ **DATE STARTED** \_\_\_\_\_ **ANNULMENT GRANTED** \_\_\_\_\_ **DATE** \_\_\_\_\_

**IF PRESENT SPOUSE OR FIANCÉ WAS PREVIOUSLY MARRIED:**

**TO WHOM:** *(Please include Maiden Name)*

**PLACE OF MARRIAGE:** *(Church/Setting, City and State)*

- |          |       |
|----------|-------|
| #1 _____ | _____ |
| #2 _____ | _____ |
| #3 _____ | _____ |

**DATE OF MARRIAGE:**

*(Month/Day/Year)*

**MARRIAGE BY:**

*(Priest/Minister/Justice of Peace)*

**HOW MARRIAGE ENDED:**

*(Death/Divorce/Annulment)*

**DATE ENDED:**

*(Month/Day/Year)*

- |          |       |       |       |
|----------|-------|-------|-------|
| #1 _____ | _____ | _____ | _____ |
| #2 _____ | _____ | _____ | _____ |
| #3 _____ | _____ | _____ | _____ |

**ANNULMENT IN PROCESS** \_\_\_\_\_ **DATE STARTED** \_\_\_\_\_ **ANNULMENT GRANTED** \_\_\_\_\_ **DATE** \_\_\_\_\_

**CHILDREN:**

<b>NAME:</b>	<b>DATE OF BIRTH:</b>	<b>RELIGION:</b>	<b>LIVE WITH YOU?</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____