



DIOCESE OF GARY

9292 BROADWAY
MERRILLVILLE, IN 46410-7088

219-769-9292
219-738-9034 Fax

Chancery/Pastoral Center

**CHRISTIAN CANDIDATE
INFORMATION FORM**

RITEs OF CHRISTIAN INITIATION OF ADULTS

Name of Parish _____

Parish Address _____
(full address)

Candidate's name _____
First Middle Family Surname

Birth date _____

Place of Birth _____
Hospital City State

Baptismal certificate on file with this parish: Yes No

Christian Tradition of baptism _____ Date of Baptism _____

Godparent _____
First Middle Confirmation

Family Surname

Godparent _____
First Middle Confirmation

Family Surname

Mother _____
First Middle Confirmation

Maiden Family Surname

Religion (If Christian, then include Faith Tradition) _____

Father _____
First Middle Confirmation

Family Surname

Religion (If Christian, then include Faith Tradition) _____

Candidate's address _____

Telephone: _____

Emergency Name _____

Emergency Address _____

Emergency telephone _____

Please list any medical problems _____

Please list any learning difficulties _____

rites of Christian Initiation of Adults:

Full Reception into the Catholic Church: Confirmation & Eucharist

Confirmation

Date of confirmation _____

Confirmation name _____

Place of confirmation _____

Confirmation Sponsor _____
First Middle Confirmation

Family Surname

Eucharist

Date of Eucharist _____

Place of Eucharist _____

Signature of Priest _____ Date _____

Priest's Name (*printed*) _____

Remarks:

OFFICE USE ONLY:	
Dates: _____	_____
Inquiry	Rite of Acceptance
_____ Profession of Faith, Confirmation and Eucharist	