

## ADULT FORMATION GENERAL INFORMATION

Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

What is the best phone number to reach you? \_\_\_\_\_

E-mail (print clearly) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Father's Full Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Full Maiden Name \_\_\_\_\_ Religion \_\_\_\_\_

I've been Baptized, Age: \_\_\_\_\_ Religion: \_\_\_\_\_ City: \_\_\_\_\_

I've received First Eucharist Religion: \_\_\_\_\_ City: \_\_\_\_\_

I've been Confirmed Religion: \_\_\_\_\_ City: \_\_\_\_\_

If baptized, can you get a copy of your Baptismal Certificate?  YES  NO

OR, can you get some written record or picture of your Baptism which gives date, place and Church?  YES  NO

Please **check all** that apply:

I have **never** been married

I am presently separated

I am engaged to be married

I have been divorced \_\_\_\_\_ time(s)

I am cohabitating, but not married

I have received a Declaration of Nullity

I am currently married

I am divorced but not remarried

I have been married only once

I am divorced and have remarried

I have been married more than once

My spouse has been divorced

If married, was **spouse** baptized? What religion? \_\_\_\_\_

If married, who married you (Catholic Priest or Deacon, JP, etc.) \_\_\_\_\_

(CONTINUE ON BACK OF SHEET)

Other information \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list the names of your family: husband, wife, sons, daughters, or others:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you a registered member of the St. Albert the Great parish:       YES       NO

What are you most interested in learning at the start of the formation process?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

By the end of the formation process, what do you hope to achieve?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Received by \_\_\_\_\_

Date \_\_\_\_\_