

**O.C.I.A.**  
**(Order of Christian Initiation for Adults)**  
**REGISTRATION FORM**

Name: \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail: \_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Street	City	State	Zip
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Sacraments you are Requesting:  Baptism  First Communion  Confirmation

Do you have a sponsor/godparent?  Yes  No

Or:  I am curious about the Catholic faith and not seeking any Sacraments at this time.

**Are you currently going to Mass on a weekly basis?**

No. How often do you typically attend Mass? \_\_\_\_\_

Yes. Which Mass time do you usually attend? \_\_\_\_\_

Or:  I attend Mass at another Parish: \_\_\_\_\_

**What is your current religious sect?**

Protestant  Non-Denominational  Evangelical  Other (Specify) \_\_\_\_\_

**I am seeking my Sacraments at St. Clement of Rome instead of my home parish because:**

\_\_\_\_\_  
\_\_\_\_\_

**Current Marital Status:**

Single, Never Married

Married in the Catholic Church

Divorced

Married civilly or in another faith

Unmarried, Cohabiting

Married, Separated from my spouse

*If you have further questions please contact the parish office at (918) 366-3166 or [parishlife@stcbixby.org](mailto:parishlife@stcbixby.org)*