



Parish of St. Margaret Mary

1219 Excelsior Avenue • Oakand, CA. 94610

(510) 482-0596; email address: parishoffice@stmargaretm.org

Established 1922

REGISTRATION FOR PARTICIPATION IN THE CATECHUMENATE PROGRAM

Last Name: *(please send us a copy of a government-issued ID to verify your name)* _____

First & Middle Names: _____

Address (Street, City, and State): _____

Phone: _____ **Email address:** _____

Date of Birth *(please send copy of proof of date of birth such as your passport or birth certificate):* _____
month/date/year

Place of Birth *(please send copy of proof of place of birth such as your birth certificate or passport):* _____
City/State/Country

Father's Name _____

Mother's Name (Maiden Name) _____

Marital Information: *Prior to baptism, confirmation, and reception into the Church, any canonical impediments must first be addressed. Usually, such impediments pertain to the candidate's marital status. In order to determine if any impediments need to be addressed, please provide us with the following information:*

Present marital status: Circle: (A) Single with no prior marriages (B) Single but divorced (C) Married (D) Married with prior divorced union(s) (E) Widow/widower

If married, are you married to a Catholic: Circle: (Yes) (No); If yes, were you married in a Catholic Church? (Yes) (No)

If divorced from a Catholic spouse, has the marriage been annulled? Circle: (Yes) (No)

If divorced from a non-Catholic, please indicate here: (Yes) (No)

In addition to the union noted above, are there any prior unions? Circle (Yes) (No)

If yes, please describe how the previous unions have been dissolved (divorce decree, annulment, death): _____

I am registering in order to receive the following sacraments (circle all that apply): (A) Baptism (B) Confirmation: (C) First Communion (D) First Reconciliation

I was baptized in the Catholic parish of (name, city, state): _____
(please provide our Parish with a copy of your baptismal certificate)

I was baptized in a different denomination (name, city, state) _____
(please provide our Parish with a copy of your baptismal certificate)

I ATTEST THAT THE INFORMATION I HAVE PROVIDED IN THIS FORM IS CORRECT AND ACCURATE

Print name

Signature

Date

For your information:

--Instructional sessions begin in the Fall. Sessions are held most Sundays at 9:30am at the Office of the Parish
--If you have a sponsor/godparent in mind for Baptism/Confirmation, please inform the instructors, Dr. Cortright and/or Mrs. Suer. Godparent/Sponsor must be a Catholic who has been Confirmed, received First Communion, and if married, then must be married in the Catholic Church. If you have no sponsor in mind that meets the above qualifications, please inform the instructors.

If the sponsor/godparent you have in mind meets the above requirements, please write name here: _____

A letter from your sponsor's/godparent's pastor is required stating that he/she is in Good Standing with the Church.
Please have the pastor's letter as well as your baptismal certificate sent to St. Margaret Mary Church, 1219 Excelsior Ave., Oakland, CA 94610.

--As a sign of support and gratitude for the ministry of the Parish of St. Margaret Mary, we welcome your donation. Suggested donation is \$100. Thank you for supporting the Parish.