



# Holy Trinity Parish

5919 Kalaniana'ole Hwy., Kuliouou, HI

## RCIA Inventory

Please print all information

First name \_\_\_\_\_ Full middle name \_\_\_\_\_

[Maiden last name \_\_\_\_\_] Last name \_\_\_\_\_

Name you are called, if different \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Email address \_\_\_\_\_

Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_

Occupation/employer \_\_\_\_\_

Your children (names/ages of those living at home) \_\_\_\_\_

\_\_\_\_\_

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Your date of birth \_\_\_\_\_

City/state/country of birth \_\_\_\_\_

Your father's name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's maiden name \_\_\_\_\_ Religion \_\_\_\_\_

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Have you ever previously been accepted as a catechumen or candidate for full communion in the Catholic Church? \_\_\_\_\_

If yes, when and where? \_\_\_\_\_

Why did you not complete initiation at that time? \_\_\_\_\_

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Are you baptized? \_\_\_\_\_ If yes . . .

Name of church \_\_\_\_\_ Denomination \_\_\_\_\_

City/state/country \_\_\_\_\_

Date of baptism \_\_\_\_\_ Officiant \_\_\_\_\_

**If you were baptized Catholic ...**

Have you received first Holy Communion? \_\_\_\_\_ First penance? \_\_\_\_\_

Where and when? \_\_\_\_\_

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**Are you married?** \_\_\_\_\_

**If you are married . . .**

(Maiden) name of spouse \_\_\_\_\_

Spouse's religion \_\_\_\_\_

Date of marriage \_\_\_\_\_ Officiant \_\_\_\_\_

Name of place of marriage \_\_\_\_\_

City/state \_\_\_\_\_

Prior to this marriage, have **you** ever been married to another person? \_\_\_\_\_ \*

Prior to this marriage, has **your spouse** ever been married to another person? \_\_\_\_\_ \*

**If you are not married . . .**

Have you ever been married before either in a church or civilly? \_\_\_\_\_ \*

Are you engaged? \_\_\_\_\_ If yes . . .

Name of fiancé(e) \_\_\_\_\_

Has your fiancé(e) ever been married before either in a church or civilly? \_\_\_\_\_ \*

**\* If yes, fill out Prior Marriage Supplemental Form for each prior marriage.**

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Your signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/guardian signature \_\_\_\_\_ Date \_\_\_\_\_  
(If under 18 years of age)

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Baptism/confirmation name \_\_\_\_\_  
(To be chosen later)

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Godfather full name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_

Email address \_\_\_\_\_

Name of parish where member \_\_\_\_\_

Parish city/state \_\_\_\_\_

Godmother full name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home phone \_\_\_\_\_

Cell phone \_\_\_\_\_

Work phone \_\_\_\_\_

Email address \_\_\_\_\_

Name of parish where member \_\_\_\_\_

Parish city/state \_\_\_\_\_

**Note: Godparents (sponsors) must be practicing, confirmed Catholics, and if married, married in the Catholic Church.**

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# Prior Marriage Supplemental Form

*Fill out one form for each prior marriage of  
catechumen or candidate and current spouse or fiancé(e)*

**Check one:**

- This was **my** prior marriage
- This was **my current spouse's** prior marriage
- This was **my fiancé(e)'s** prior marriage.

Husband's name \_\_\_\_\_

Husband's religion \_\_\_\_\_

- Baptized                       Not baptized

Wife's maiden name \_\_\_\_\_

Wife's religion \_\_\_\_\_

- Baptized                       Not baptized

Date of marriage \_\_\_\_\_ Officiant \_\_\_\_\_

Name of place of marriage \_\_\_\_\_

City/state/country \_\_\_\_\_

**How did this marriage end? Check one:**

- Death                       Divorce

**Staff use only – Possible resolutions**

- Lack of canonical form – if one or both parties are Catholic and marriage was outside of church
- Pauline privilege – if both parties are not baptized and one is to be baptized
- Defect of consent (ordinary process nullity cause)