



Sacramental Enrolment Form

Rite of Christian Initiation - Adult

Please complete and return with a photocopy of an ID document (eg birth certificate/drivers licence),
and baptismal certificate if applicable:

email: sacraments@ec.org.au post: PO Box 294, Ellen Grove Qld 4078

Information about the RCIA Program available online at www.ec.org.au/sacraments.

Personal Information			
First Name:		Middle Names: (if applicable)	
Surname:		Maiden Name: (if applicable)	
Phone:			
Email:			
Residential Address:			
Date of Birth:	/ /	Place of Birth:	
Additional Information			
Have you been Baptised?	<input type="checkbox"/> Yes (<i>please complete details below</i>) <input type="checkbox"/> No <input type="checkbox"/> Unsure		
	Baptism Date:	/ /	Denomination:
	Name of Church:		
	Address of Church:		
	Baptismal Certificate:	<input type="checkbox"/> Copy provided <input type="checkbox"/> Not available	
Have you ever been Married?	(tick all that apply) <input type="checkbox"/> Yes – I am currently married <input type="checkbox"/> Yes – The marriage has ended in divorce <input type="checkbox"/> No – I have never been married		
Sponsor Details:	Name of Sponsor:		
	<input type="checkbox"/> Please help me find a sponsor		
Signature:		Date:	/ /

Privacy Declaration:

Personal details are collected for the purposes of providing information to participants of the Sacramental journey, to provide other services, and to add/update participant details to Emmanuel Community's database. We may disclose personal information to Archdiocesan agencies and other service providers who assist us in operating our organisation. All personal details are stored and used according to Emmanuel's privacy policy, available at www.ec.org.au/privacy.

Photo Release:

Photographs taken throughout the program will be used for sharing the event online and in social media, promoting the program to the participants and to the wider community, and for future Sacramental program resources. If you do not want photos of yourself/your family used in this way, please tick the box below.

I do not give permission for photos of me/my family to be shared online or published in future resources.

Further Communication:

By engaging in a ministry of Emmanuel Community, we will add your details to communications (eg email list), in order to provide further information about activities of the Community, to offer additional opportunities for you to engage in our activities and to assist your faith life.

I do not wish to be added to Emmanuel's communication channels after this program.

Office Use Only:

Date of Sacrament: _____

Birth Certificate

Baptism Certificate

Email List

Sacramental Register

Other information: