



# RCIA Adult Information Form

Date: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

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

Date of Birth: \_\_\_\_\_

Place of Birth (City, State): \_\_\_\_\_

Father's name: \_\_\_\_\_

Mother's maiden name: \_\_\_\_\_

## I. Contact Information

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email: \_\_\_\_\_

## II. Religious History

Have you ever been baptized? (Please attach copies of the necessary certificates.)

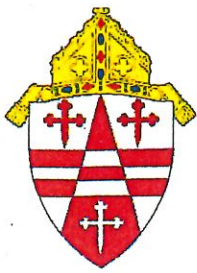
Yes (PLEASE PROVIDE A COPY OF YOUR BAPTISM CERTIFICATE)

DENOMINATION: \_\_\_\_\_

No (PLEASE PROVIDE A COPY OF YOUR BIRTH CERTIFICATE)

I am not sure (PLEASE PROVIDE A COPY OF YOUR BIRTH CERTIFICATE)





# Archdiocese of Seattle

## Photograph, Video/Sound and Image of Work Consent

Date: \_\_\_\_\_

From time to time, photographs and video/sound may be taken of youth ministry/parish/school events and gatherings. This may also apply to written composition or visual art (images of work).

\_\_\_\_\_ (name of Organization) would like to be able to use these photographs, videos/sounds and images of work for flyers, parish and diocesan publications, and the parish website. Written consent by the parent/guardian is required. If names are used, youths will only be identified by first names. If there are concerns about photographs, videos/sounds or images of work posted on the website, please contact \_\_\_\_\_ (name of Organization) and they will promptly be removed.

I, the parent/guardian of \_\_\_\_\_ (name of youth) authorize and give full consent, without limitation or reservation, to \_\_\_\_\_ (name of Organization) to publish any photograph, video/sound or image of work in which the above named youth appears while participating in any program associated with \_\_\_\_\_ (name of Organization). There will be no compensation for use of any photograph, video/sound or image of work at the time of publication or in the future.

If the youth and/or parent/guardian wish to rescind this agreement they may do so at any time with written notice.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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I do not give permission to publish any photograph, video/sound or image of work of my child

Child's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_