

CHURCH OF OUR MOTHER OF PERPETUAL HELP  
IPOH GARDEN, 31400 IPOH. (Tel. 05-5458220)

**ADULT ENQUIRY TO THE CATHOLIC FAITH (RCIA)**

*\*(DOCUMENTS REQUIRED: PHOTOSTAT IC & BIRTH CERT)*

MR/MRS/MS: \_\_\_\_\_

*(NAME AS IN IC)*

Gender: Male  Female

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

Tel: \_\_\_\_\_ (hse) \_\_\_\_\_ (h/p) \_\_\_\_\_ (off.)

Occupation: \_\_\_\_\_ Present Religion: \_\_\_\_\_

Marital Status:  Single  Married

Place of Marriage: \_\_\_\_\_

No. of children: \_\_\_\_\_ Ages: \_\_\_\_\_

Language Preferred:  Eng.  Chinese  B.M.  Tamil

Date of Registration : \_\_\_\_\_

Signature: \_\_\_\_\_