

CHURCH OF CHRIST THE KING

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RCIA Sponsor Information Form

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| Name in NRIC/Passport: (USE BLOCK LETTERS) | | NRIC/Passport: (last 3 digits & alphabet eg: 123A) | |
| Date of Birth: (DD/MM/YYYY) | | Country of Birth: | |
| Gender: | | Nationality: | |
| Race / Religion | / Catholic | Occupation | |
| Address: | | | Postal code: |
| Contact Number: (Mobile / Home) | | Email address: | |
| Have you been baptized before? *Yes / No (*please circle one) | | | |
| If 'Yes': Name of Church for Baptism: | | Date of Baptism: (DD/MM/YYYY) | |
| If 'Yes': Name of Church for Confirmation: | | Date of Confirmation: (DD/MM/YYYY) | |
| Name of Church Registered: | | | |
| Marital Status: | *Single / Married/ Divorced / Separated / Widowed (*please circle one) | | |
| Name of Spouse: | | Spouse Religion: | |
| Do you have experience as a Sponsor | * Yes / No (*please circle one) | | |
| Are you attending RCIA with someone? | If Yes: please input name(s): | | |
| What gifts do you bring / share | *Hospitality / Music / Singing / Prayers / Art / Computer / IT (*please select) If others: Please list. | | |
| Covid Health Status: Fully Vaccinated *Yes / No (*please circle one) If Yes, Date effective from: _____ | | | |
| <p>** Please Note: Being Sponsors require commitment.</p> <p>There will be compulsory sponsor training(s) before each new process. There will be additional trainings and meetings other than normal class times. Every effort must be made to attend all meetings.</p> <p>By signing below, you agree to abide to the rules and expectations of being a sponsor. GOD BLESS</p> | | | |
| <p>Privacy Policy</p> <p>Kindly note that in filling up this form, I agree and consent to the collection, use, storage, retention, adaptation, modification, reading, retrieval, transmission, blocking, erasure or destruction ("processing") of the personal data provided by me in this form and to the sharing/processing and relevant third parties (including but not limited to entities outside the Singapore jurisdiction) in connection with Roman Catholic Church related activities, pastoral services and other related purposes.</p> <p>Where I am providing such personal data on behalf of others, I confirm that I have obtained the consent of these individuals for the disclosure of their personal data for the purpose stated above.</p> | | | |
| I, _____ (name), consent to the above terms. | | | |
| Signature: | | Date: | |