

Adult Inquirer Information Form

Information on this form is held in confidence and is not shared without your permission.

				Γ		Today's Date:	/ /
First Na	ame:					Middle:	
Last:						Maiden Name: (If Applicable)	
Date of	Birth:		/	/		Age:	_
Place of	f Birth:		[Includ	e locatior	(town, city, etc.)	, region (state, province, territo	ory, etc.), and country]
Name o	f Father:						
Name o I.	f Mother	: TACT I	[Includ	e mother' MATI	s Maiden Name]		
	•						_Zip code:
Home F							· · · · · · · · · · · · · · · · · · ·
Cell Ph	one:	()	-		Occupation:	
E-mail:							
II.	RELIC	GIOUS	HIST	ORY			
1. Wł						n?	
	ve you ev	ver beei	- n baptiz	ed?	□ Yes	□ No following information:	□ I am not sure.
a)	In what	denomi	nation v	vere you	baptized?		
b)	Date or	your ap	proxima	ite age v	when you were	baptized:	
c)	Baptism	nal name	e (if differ	ent from y	our current name):	
d)	Place of	f Baptisı	m (name o	of church/	denomination):		
e)	Address	s, if knov	wn: <u></u> provide a	conv of	vour Baptismal	Record as proof of Baptism	, or an affidavit will need to be filled out.
3. If y						sacraments you have a	

□ Penance (Reconciliation)	□ Eucharist (First Communion)	□ Confirmation
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III.	CURR	ENT MARITAL ST	ATUS	
Check t	the approp	priate statement(s) below	and provide any information reque	sted beneath each statement.
	1. I hav	e never been married.		
	2. I am	engaged to be married		
	a)	Your Fiancé(e)'s Name	:	
	,			
	b)	Your Fiancé(e)'s Curren	nt Religious Affiliation (if any):	
)		g (<i>j</i>):	
	c)	For you:	□ This is my first marriage.	□ I have been married before.
	C)	i or you.		
	d)	For your Fignod(a).	□ This is their first marriage	□ They have been married before.
	d)	For your France(e).	□ This is their first marriage.	
_	Э Т			
		married.		
	a)	Your Spouse's Name:		
	L.)	V C C C		
	D)	Your Spouse's Current	Religious Affiliation (if any):	
		T.		
	c)	For you:	\Box This is my first marriage.	\Box I have been married before.
	-	_		
	d)		-	\Box They have been married before.
		If you or your spouse he	ave previous marriages please list th	ose on an additional sheet.
	e)	Date of Marriage:	/ /	
	f)	Place of Marriage:		
		[Include locality (town, city, o	etc.), region (state, province, territory, etc.),	and country]
	g)	Officiating Authority of	Marriage:	
	5)	• •	tian minister, Christian minister, Catholic pr	iest]
	4. I am	married, but separated	_	-
	5. I am	divorced and I have no	ot remarried.	
	6. I am	a widow/widower and	have not remarried since my spou	se's death.
	•••••		nave not remained since my spou	
IV.	FAMI	LY INFORMATION	[
			lependents (e.g., Daughter – Jane; 1	Standard Labor
Lisi ine	name(s) () any children or other o	iepenaenis (e.g., Daugnier – Jane; s	Stepson – John).
Deletie	nchin	Nome		A cost
Relation	nsnip:	Name	:	Age:
Dalati	nchin	λτ		A
Relation	nsnip:	Name	:	Age:
D.1.4		Ъ.Т.		A .
Kelatio	nsnıp:	Name	:	Age:
D.1.1		2.7		
Relation	nship:	Name	:	Age:

Relationship: ______Age: _____

V. GENERAL QUESTIONS

What or who has led you to want to know more about the Catholic Faith?
Please, describe the types of religious education you have received, as a child and as an adult.
What contact have you had with the Catholic Church to date?
What are some of the questions or concerns you have about the Catholic Church?
At this point in time, which of the following statements best describes your present feelings and though about the possibility of joining the Catholic Church? (Please, check only one box).

□ I need much more information about the Catholic Church before I would consider joining.

 \Box I am considering joining, but I am still unsure about it.

 \Box I am fairly sure that I would like to join, but I still need some time to study and pray about it.

□ I am fairly sure that I want to join the Catholic Church.