

Adult Inquirer Information Form (confidential)

Today's Date: _____

Name: First: _____ Middle: _____ Last: _____

Maiden Name (if applicable): _____

Date of Birth: _____ Age: _____

Place of Birth: _____
(Include city, state)

Name of Father: _____

Name of Mother: _____ (maiden name): _____

I. CONTACT INFORMATION

Full Mailing Address: _____

Phone: (Daytime) _____ (Evening/Weekend): _____

Cell Phone: _____ Occupation: _____

Email: (Home) _____ (Other): _____

II. RELIGIOUS HISTORY

1. What, if any, is your present religious affiliation? _____

2. Have you ever been baptized? ☐ Yes ☐ No ☐ I am not sure

If you answered "Yes" to Question 2, please provide the following information:

a. In what denomination were you baptized? _____

b. Date or your approximate age when you were baptized: _____

c. Baptismal name (if different from current name): _____

d. Place of Baptism (name of church/denomination): _____

e. Address, if known: _____

f. Location, if known: _____

(include city, state, zip code +4)

3. If you were baptized as a Catholic, check those sacraments you have already received:

☐ Penance (Confession) ☐ Eucharist (First Communion) ☐ Confirmation

4. Why have you come to the Church at this Time? Check one.

_____ I am just looking to see what the Catholic Church has to offer.

_____ I am seriously thinking about becoming a Catholic.

_____ I want to update my Catholicism.

_____ I am interested in receiving missed sacraments (Communion, Confirmation).

III. CURRENT MARITAL STATUS

Please check the appropriate statement.

_____ I have never been married.

_____ I was previously married to a _____ Catholic or _____ Non-Catholic who had never been married before this marriage.

_____ I was previously married to a _____ Catholic or _____ Non-Catholic who had been married before this marriage.

_____ I was previously married but have received a declaration of nullity from the:
(Arch) Diocese of: _____

Protocol Number: _____ Date Granted: _____

_____ I am presently Married _____ Divorced _____ Widowed _____
Living Together _____ Engaged _____

If currently married:

Name of Spouse: _____

Catholic: _____ Non-Catholic: _____

Place of Marriage: _____
(church) (city, state, zip+4)

Who officiated at your marriage?

Catholic Priest: _____ Protestant Minister: _____ Justice of the Peace: _____

Is this your first and only marriage? ☐ Yes ☐ No

Is this your spouse's first and only marriage? ☐ Yes ☐ No

The following responses pertain to my _____ Spouse _____ Fiancé/Fiancée

_____ He/She has never been married before.

_____ He/She was previously married to a _____ Catholic or _____ Non-Catholic who had never been married before this marriage.

_____ He/She was previously married to a _____ Catholic or _____ Non-Catholic who had been married before this marriage.

_____ He/She was previously married but has received a declaration of nullity from the:
(Arch) Diocese of: _____

Protocol Number: _____ Date Granted: _____

_____ He/She was previously married to a person who has died.

Name of your Fiancé/Fiancée: _____
(First) (Middle) (Maiden) (Last)

Your Fiancé/Fiancée's current Religious Affiliation (if any): _____

IV. FAMILY INFORMATION

List the name(s) of any children or other dependents (e.g., Daughter—Jane; Stepson—John).

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____