



# Adult Inquirer Information Form

Welcome! Please print clearly and double check all spelling and addresses.  
Information on this form is held in confidence and is not shared without your permission.

Today's Date \_\_\_\_\_

Last Name \_\_\_\_\_

(Last name at baptism \_\_\_\_\_)

First Name \_\_\_\_\_

Middle Name \_\_\_\_\_

Birth: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ Age \_\_\_\_\_

Place of Birth: City \_\_\_\_\_ State/Province \_\_\_\_\_

Country \_\_\_\_\_

Father's Full Name: \_\_\_\_\_  
First middle last

Mother's Full Maiden Name: \_\_\_\_\_  
First middle birth last name

Current Address: Street address \_\_\_\_\_

City/Zip \_\_\_\_\_

Current Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

## RELIGIOUS HISTORY

What, if any, is your present religious affiliation? \_\_\_\_\_

Have you ever been baptized?  Yes  No  I am not sure *If yes, please answer the following:*

(a) In what denomination were you baptized? \_\_\_\_\_

(b) Date of Baptism: \_\_\_\_\_

(c) Name on Baptismal Certificate: \_\_\_\_\_

(d) Church of Baptism: \_\_\_\_\_

(e) Mailing Address: (required for Catholic Baptisms)

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

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ (PLEASE ATTACH CERTIFICATE OF BAPTISM.)

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

- Reconciliation (Confession)  Eucharist (First Communion)  Confirmation

Date of First Communion: \_\_\_\_\_  N/A

Name of Church: \_\_\_\_\_

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

City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip \_\_\_\_\_

Country \_\_\_\_\_ (PLEASE ATTACH CERTIFICATE OF FIRST EUCHARIST.)

**CURRENT MARITAL STATUS**

I have never been married.

I am engaged to be married.

Your Fiance(e)'s Name: \_\_\_\_\_

Your Fiance(e)'s Current Religious Affiliation (if any): \_\_\_\_\_

For you:  This is my first marriage.  I have been married before.

For your fiance(e):  This is his/her first marriage.  My fiance(e) has been married before.

I am married.

Your Spouse's Name: \_\_\_\_\_

Your Spouse's Current Religious Affiliation (if any): \_\_\_\_\_

For you:  This is my first marriage.  I have been married before.

For your spouse:  This is my spouse's first marriage.  My spouse has been married before.

Date of Marriage: \_\_\_\_\_

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

Officiating Authority of Marriage: \_\_\_\_\_

I am married, but separated from my spouse.

I am divorced and I have not remarried.

I am a widow/widower and have not remarried since my spouse's death.

**FAMILY INFORMATION**

Please list the name(s) of any children or other dependents.

Relationship: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

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Relationship: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

Relationship: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

**GENERAL QUESTIONS**

**What or who has led you to want to know more about the Catholic Faith? to complete your Sacraments?**

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**Please describe any religious education you may have received, as a child and as an adult.**

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**What contact have you had with the Catholic Church to date?**

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**What are some of the questions or concerns you have about the Catholic Church?**

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**At this point in time, which of the following statements best describes your present feelings and thoughts about the possibility of entering the Catholic Church? (please check one)**

- I need much more information about the Catholic Church before I would consider entering.**
- I am considering entering, but I am still unsure about it.**
- I am fairly sure that I would like to enter, but I still need some time to study and pray about it.**
- I am fairly sure that I want to enter the Catholic Church.**
- I am already Catholic and need to complete my Sacraments.**

