

ADULT INQUIRER INFORMATION FORM

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

Today's Date _____

First Name _____ Middle Name _____ Last Name _____

Maiden Name *(If applicable)* _____

Date of Birth _____ Age _____

Place of Birth _____
(Include locality (town, city, county, etc.), region (state, province, territory, etc.), and country)

Name of Father _____

Name of Mother *(Include maiden name)* _____

CONTACT INFORMATION

Full Mailing Address _____

Phone *(Daytime)* _____ *(Evening/Weekend)* _____ *(Cell)* _____

Occupation _____

Email *(Home)* _____ *(Other)* _____

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:

In what denomination were you baptized? _____

Date or your approximate age when you were baptized _____

Baptismal name (if different from current name) _____

Place of Baptism (name of church/denomination) _____

Address, if known _____

Location, if known _____
(Include locality (town, city, county, etc.), region (state, province, territory, etc.), and country)

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

Penance (Confession) Eucharist (First Communion) Confirmation

CURRENT MARITAL STATUS

Check the appropriate statement(s) below and provide any information requested beneath each statement.

I have never been married.

I am engaged to be married.

Your Fiancé(e)'s Name _____

Your Fiancé(e)'s Current Religious Affiliation (if any) _____

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

For your fiancé(e): This is his/her first marriage. My fiancé(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 _____
(Include LOCALITY (town, city, county, etc.), REGION (state, province, territory, etc.), and COUNTRY)

Officiating Authority of Marriage _____
(Civil government, non-Christian minister, Christian minister, Catholic cleric)

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

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

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?

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 thoughts about the possibility of joining the Catholic Church? *(Please circle one)*

- A. I need much more information about the Catholic Church before I would consider joining.
- B. I am considering joining, but I am still unsure about it.
- C. I am fairly sure that I would like to join, but I still need some time to study and pray about it.
- D. I am fairly sure that I want to join the Catholic Church.

Are you a member of a Masonic organization? _____

AFFIDAVIT OF BAPTISM

This form is used ONLY when there is a verifiable Baptism, but no official document or certificate exists.

In the presence of the _____
(Name of Catholic cleric under whose authority this affidavit is accepted by the Catholic Church)

I (we) testify that _____
(Full legal name of person baptized)

child of _____
(Full legal name of mother of person baptized)

and _____
(Full legal name of father of person baptized)

born in _____
(Include LOCALITY (town, city, county, etc.), REGION (state, province, territory, etc.), and COUNTRY)

on the _____ day of _____ in _____
(Day of birth) (Month of birth) (Year of birth)

WAS BAPTIZED

on the _____ day of _____ in _____
(Day of Baptism) (Month of Baptism) (Year of Baptism)

at _____
(Place of Baptism, including CHURCH NAME (or hospital, etc.), LOCALITY, REGION, and COUNTRY)

by _____
(NAME of the individual who performed the Baptism, including TITLE, if known)

the godparents (or sponsors) being _____
(If known)

and _____
(If known)

Witness(es) to the Baptism

(Signature of witness--this can be the subject of the affidavit if old enough to remember the Baptism) Date _____

(Signature of second witness, if required by the diocese) Date _____

Office Use Only:

Date affidavit received _____ Received by _____

Parish receiving affidavit record _____

Full address of parish _____