

☐ Penance (Confession)

Adult Inquirer Information Form



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

	Today's Date:
Name: First: Middle:	Last:
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 (including Maiden Name):	
I. CONTACT INFORMATION	
Full Mailing Address:	
,	_(Evening/Weekend)
Thore. (Baytime)	
Cell/Mobile Phone:	Occupation:
Email: (Home)	(Other)
II. RELIGIOUS HISTORY	
1. What, if any, is your present religious affiliation?	
2. Have you ever been baptized? \square YES \square 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 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:	

☐ Eucharist (First Communion)

 \square Confirmation

III. CURRENT MARITAL STATUS

Check the appropriate statement(s) below and provide any information requested beneath each statement. 1. I have never been married. 2. I am engaged to be married. a. Your Fiancé(e)'s Name: b. Your Fiancé(e)'s Current Religious Affiliation (if any): c. For you: \square This is my first marriage. \square I have been married before. d. For your Fiancé(e):

This is his/her first marriage.

My Fiancé(e) has been married before. ☐ 3. I am married. a. Your Spouse's Name: b. Your Spouse's Current Religious Affiliation (if any): c. For you: \Box This is my first marriage. \Box I have been married before. d. For your spouse: ☐ This is my spouse's first marriage. ☐ My spouse has been married before. e. Date of Marriage: _____ f. Place of Marriage: ___ (include **locality** [town, city, county, etc.], **region** [state, province, territory, etc.] and **country**) g. Officiating Authority of Marriage: ___ (civil government, non-Christian minister, Christian minister, Catholic cleric) 4. I am married, but separated from my spouse. □ 5. I am divorced and I have not remarried. 6. I am a widow/widower and have not remarried since my spouse's death. IV. FAMILY INFORMATION List the name(s) of any children or other dependents (e.g. Daughter – Jane; Stepson – John). Relationship: Name: _____ Age: _____ Relationship: ______ Age: ______ Age: _____ Relationship: ______ Age: ______ Age: _____ Relationship: ______ Age: ______ Age: _____

Relationship: ______ Age: ______ Age: _____