

RCIA Adult Inquirer Information Form

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

This document is distributed after several inquiry sessions prior to discernment for Accept

 (see Adaptation A)

 Today’s Date:

First Name: Middle: Last:

Maiden Name *(if applicable)*:

Date of Birth: Age:

Place of Birth:

 *(Include locality: town, city, and country)*

Name of Father:

Name of Mother:

# CONTACT INFORMATION

Full Mailing Address:

Suburb: City: Post Code:

Telephone*: (Daytime)* *(Evening/Weekend)*

Cell/Mobile Phone: Occupation:

Email: *(Home)*  *(Other)*

# RELIGIOUS HISTORY

What, if any, is your present religious affiliation?

Have you ever been baptised? □ yes □ no □ I am not sure

*If you answered “yes” to the question above, please provide the following information:*

* In what denomination were you baptised:
* Date or your approximate age when you were baptised:
* Baptismal name *(if different from current name)*:
* Place of Baptism *(name of church/denomination)*:
* Address, if known:
* Location, if known:

 *(Include locality: town, city, and country)*

Baptism certificate received: □ yes □ no

Marriage certificate received: □ yes □ no

If you were baptised as a Catholic, check those sacraments you have already received:
□ Penance (Confession) □ Eucharist (Holy Communion) □ Confirmation

# CURRENT MARITAL STATUS

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

□ 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) was 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 was married before.
* Date of marriage:
* Place of marriage:

 *(Include locality: town, city, and country)*

* Officiating authority of marriage:

 *(civil celebrant, 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.

If you, or your spouse, have been married before, we will need to discuss this with you.

You may need to contact the Tribunal of the Catholic Church: 03 366 9869.

# GENERAL QUESTIONS

OPTIONAL

*(Do not keep information or separate)*

Name: Date: DATE:

* 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 thoughts about the possibility of joining the Catholic Church? *(please tick one)*

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

□ I am considering joining but I am still unsure about it.

□ 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.

Date Parish Received: By Whom:

Copy of Baptism Certificate Received: Candidate:

Follow-up:

Date Parish Received: By Whom:

Copy of Baptism Certificate Received: Candidate:

Follow-up: