



# Adult Inquirer Information Form

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

*We delight in your decision to consider becoming Catholic thru the RCIA process here at St. Brendan Parish. Please complete this information below, if baptized attach a copy of your baptismal certificate to this form. We ask that you call 614-876-1272 so that an appointment can be scheduled with the RCIA director and an official welcome can be extended to you. Following the initial conversation, an appointment with one of our priests or deacons will be set up at a mutually convenient time.*

*The appointment interview should take about 30 minutes and is intended to be a time for us to discern how we can best meet your needs and answer your questions about the RCIA process. Thank you!*

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

Name: First: \_\_\_\_\_ Middle: \_\_\_\_\_ Last: \_\_\_\_\_

Maiden Name (if applicable): \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Place of Birth: \_\_\_\_\_  
City State Zip

Name of Father: \_\_\_\_\_  
First Last

Name of Mother: \_\_\_\_\_  
First Last Maiden

## I. CONTACT INFORMATION

Full Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_  
City State Zip

Phone: (Daytime) \_\_\_\_\_ (Evening/Weekend) \_\_\_\_\_

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?  Yes  No  I am not sure

*If you answered "Yes" to Question 2, please provide the following information along with a copy of your baptismal certificate:*

(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): \_\_\_\_\_  
Church name

(e) Address, if known: \_\_\_\_\_  
Street City State Zip

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

Penance (Confession)  Eucharist (First Communion)

## 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:  This is my first marriage.  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:  This is my first marriage.  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: \_\_\_\_\_  
Church City State Zip

(g) Officiating Authority of Marriage: \_\_\_\_\_  
(civil government, non-Christian minister, Christian minister, Catholic cleric)





**4. What are some of the questions or concerns, if any, that you have about the Catholic Church?**

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**5. 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 check 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.

**I have an adult who would sponsor me in this journey whose responsibilities include:**

- Attending weekly RCIA input session on Tuesday evenings from 7-8:30 PM.
- Attending any and all scheduled weekend RCIA events.
- Being a mentor and guide to me throughout the process.
- Being a practicing Catholic who has been fully initiated (received Baptism, Eucharist & Confirmation)

Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

Full Mailing Address: \_\_\_\_\_  
Street

\_\_\_\_\_

City

State

Zip

Phone: (Daytime) \_\_\_\_\_ (Evening/Weekend) \_\_\_\_\_

Cell/Mobile Phone: \_\_\_\_\_

Email: (Home) \_\_\_\_\_ (Other) \_\_\_\_\_

**I would need the parish to provide a sponsor for me.**