



Child/Teen Inquirer Information Form

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

Today's Date: _____ / _____ / _____

First Name: _____ Middle: _____

Last: _____ Maiden Name: _____
(If Applicable)

Date of Birth: _____ / _____ / _____ Age: _____

Place of Birth: _____
[Include **location** (town, city, etc.), **region** (state, province, territory, etc.), and **country**]

Grade Level: _____ School: _____

I. PARENT/GUARDIAN CONTACT INFORMATION

List below the name(s) of parent(s)/guardian(s) and present religious affiliation, if any:

Name: _____ Relationship: _____

Religious Affiliation: _____

Home Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____ Occupation: _____

E-mail: _____

Name: _____ Relationship: _____

Religious Affiliation: _____

Home Phone: (_____) _____ - _____ Work Phone: (_____) _____ - _____

Cell Phone: (_____) _____ - _____ Occupation: _____

E-mail: _____

Full Mailing Address: _____

City: _____ State: _____ Zip code: _____

Child/Teen lives with: ☐ Parents ☐ Mother Only ☐ Father Only ☐ Other _____

If the child/teen lives with one parent/guardian; please, indicate who has legal custody: _____

If there is a joint custody arrangement; please, provide alternate full address: _____

II. RELIGIOUS HISTORY

1. What, if any, is your child/teens present religious affiliation? _____

2. Has your child/teen ever been baptized? ☐ Yes ☐ No ☐ I am not sure.

If you answered "Yes" to Question 2; please, provide the following information:

a) In what denomination were they baptized? _____

b) Date or their approximate age when they were baptized: _____

c) Baptismal name (if different from your current name): _____

d) Place of Baptism (name of church/denomination): _____

e) Address, if known: _____

You will need to provide a copy of your Baptismal Record as proof of Baptism, or an affidavit will need to be filled out.

3. If your child/teen was baptized as a Catholic, check those sacraments they have already received:

☐ Penance (Reconciliation)

☐ Eucharist (First Communion)

☐ Confirmation

4. For a teen: Has he/she been married or is he/she currently married?

☐ Never been married

☐ Currently is married

☐ Has been married

III. FAMILY INFORMATION

List the name(s) of any siblings (e.g., Sister – Jane; Stepbrother – John).

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

Relationship: _____ Name: _____ Age: _____

IV. GENERAL QUESTIONS

1. What or who has led your child/teen to want to know more about the Catholic Faith?

2. Please, describe the types of religious education your child/teen has received.

3. What contact has your child/teen had with the Catholic Church to date?

4. What are some of the questions or concerns your child/teen has about the Catholic Church?

5. Please, summarize below the reason(s) your child/teen desires to begin the Christian initiation process.
