



# 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. Include maiden names:*

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?**

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

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

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

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

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