

# RITE OF CHRISTIAN INITIATION FOR ADULTS

INQUIRY - Initial Interview

CONFIDENTIALITY WILL BE UPHOLD AT ALL TIMES

Name: \_\_\_\_\_ (Maiden Name) \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Occupation: \_\_\_\_\_

Past Church Affiliation: \_\_\_\_\_

Have you ever been baptized in any religion? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes: Date: \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_

Have you ever been confirmed in any religion? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes: Date: \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_

Other Sacraments received: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Church Affiliation: \_\_\_\_\_

Currently, I am: Single \_\_\_\_\_ Engaged \_\_\_\_\_ Married: \_\_\_\_\_ Widowed: \_\_\_\_\_

Have you been married before? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If Yes: Church Ceremony: \_\_\_\_\_ Civil Ceremony: \_\_\_\_\_

If Church Ceremony, Name of Church: \_\_\_\_\_

Denomination: \_\_\_\_\_

How did you first become interested in the RCIA Program:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_