

RC		HILLIARD,
	Adult Inquirer Information For	m

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

We delight in your decision to consider becoming Catholic through the RCIA process here at St Brendan Parish. Please complete this information below, and if baptized, attach a copy of your baptismal certificate. Contact Fr Stinnett at 614-876-1272 ext 226, or email frstinnett@stbrendans.net so that an appointment can be scheduled. 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:	Mid	dle:	_Last:	
Maiden Name (if applicable	ə):			
Date of Birth:		Age: _		
Place of Birth:	City	State	Zip	
Name of Father:	First	Last		
Name of Mother:	First	Last	Maiden	
I. CONTAG	CT INFORMA ⁻	ΓΙΟΝ		
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 affilia	ation?			
2. Have you ever been baptized? Yes 	🗆 No	I am not sure		
<i>If you answered "Yes" to Question 2, p of your baptismal certificate:</i>	olease provid	le the following infor	mation along	with a cop
(a) In what denomination were you baptiz	ed?			
(b) Date or your approximate age when ye	ou were bapt	zed:		
(c) Baptismal name (if different from current na				
(d) Place of Baptism (name of church/denomin	nation):			
		Church nam	le	
(e) Address, if known:		City	State	Zip
		-		Ζip
3. If you were baptized Catholic, check those a	Saciaments	you have already red	erveu.	
Penance (Confession)	ucharist (Firs	t Communion)		
III. CURRENT MARITAL ST	ATUS			
Check the appropriate statement(s) below and pr	rovide any inf	ormation requested be	eneath each st	atement.
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 Aff				
(c) For you: This is my first marriage.				
(d) For your fiancé(e):			een married be	efore.
3. I am married.				
(a) Your Spouse's Name:				
(b) Your Spouse's Current Religious Affilia				
(c) For you: □ This is my first marriage. □				
(d) For your spouse: 🗅 This is my spouse				before.
(e) Date of Marriage:				
(f) Place of Marriage: Church		City	State	Zip
(g) Officiating Authority of Marriage:				r

(civil government, non-Christian minister, Christian minister, Catholic cleric)

- □ 4. I am married, but separated from my spouse.
- □ 5. I am divorced and I have not remarried. □ I may be in need of a Church annulment
- □ 6. I am divorced and remarried.
- **7.** I am a widow/widower and have not remarried since my spouse's death.

□ 8. I am cohabitating with another adult.

IV. FAMILY INFORMATION

List the name(s) of any children or other dependents (e.g., Daughter — Jane; Stepson — John).					
Relationship:	Name:			_Age:	
Have he/she been baptized?	Yes	D No	I am not sure		

If you answered "Yes", please provide the following information along with a copy of the baptismal certificate:

(a) Baptized into what denomination?				
(b) Date or approximate age of baptism:				
(c) Baptismal name (if different from current name)	:			
(d) Place of Baptism (name of church/denominatio	n):	Church name		
(e) Address, if known: Street		City	State	Zip
Are your children interested in the Catholi	c Faith?	s 🗆 N	lo	
Relationship: Name:				Age:
Have he/she been baptized?	🖵 No	I am not	sure	
lf you answered "Yes", please provide the baptismal certificate:	following informat	ion along wi	ith a copy	of the
(a) Baptized into what denomination?				
(b) Date or approximate age of baptism:				
(c) Baptismal name (if different from current name)):			
(d) Place of Baptism (name of church/denominatio	n):	Church name		
(e) Address, if known:		City	State	Zip
Are your children interested in the Catholi	ic Faith? D Yes	s 🗆 N	lo	

ationship:	Name:				_Age:
Have he/she been baptize	ed? 🛛 Yes	🗅 No	🗅 I am r	ot sure	
lf you answered "Yes", p baptismal certificate:	lease provide the f	ollowing infori	mation along	with a copy o	f the
(a) Baptized into what deno	omination?				
(b) Date or approximate ag	e of baptism:				
(c) Baptismal name (if differe	ent from current name): _				
(d) Place of Baptism (name	of church/denomination):	:	Church na	ne	
(e) Address, if known:					
Street	t		City	State	Zip
Are your children interes	ted in the Catholic	Faith?	Yes 🗆	No	

V. GENERAL QUESTIONS

1. What or who has led you to want to know more about the Catholic Faith?

2. Please describe the types of religious education you have received, as a child and/or as an adult.

3. What contact have you had with the Catholic Church to date?

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

5. At this point in time, which of the following statements best describes your present feeling
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.