



*Becoming Catholic*

ORDER OF CHRISTIAN INITIATION OF ADULTS  
CATHOLIC COMMUNITY OF BARTLESVILLE

# Adult Inquirer Information Form

2024-2025

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Maiden Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Email \_\_\_\_\_

How do you wish to be contacted?  Call Cell Phone  Text  Call Home Phone  Email

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

(Please include city and state)

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_ Maiden Name \_\_\_\_\_

## Baptism Information

Have you been baptized?  Yes  No  I'm not sure Date (or approx. date) of baptism \_\_\_\_\_

Were you baptized in the Catholic Church?  Yes  No Name of Catholic Church \_\_\_\_\_

(Please include name, city and state)

If no: Which denomination? \_\_\_\_\_ Name of Church \_\_\_\_\_

(Please include name, city and state)

## Sacraments Celebrated in the Catholic Church

If you were baptized as a Catholic, check those sacraments you have already received:

N/A  Reconciliation (Confession)  Eucharist (First Communion)  Confirmation

If married, was your marriage celebrated in the Catholic Church?  Yes  No  N/A

## Your Marital Status

Single  Married  Divorced  Widowed  Remarried  Engaged

Date of present marriage \_\_\_\_\_ Name of Church \_\_\_\_\_

(Please include name, city and state)

This is my first marriage.  I have been married before. If remarried, date of first marriage \_\_\_\_\_

If you have been married before, how many times? \_\_\_\_\_

If married to a Catholic, has your marriage been blessed in the Catholic Church?  Yes  No

If divorced, has a decree of nullity ever been granted by the Catholic Church?  Yes  No

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

## Your Spouse/Fiancé's Status

His/Her Name First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_ Maiden \_\_\_\_\_

Has he/she ever been baptized?  Yes  No  Don't know

If yes, was he/she baptized Catholic?  Yes  No  Don't know

If baptized in another faith, what denomination? \_\_\_\_\_

Is this his/her first marriage?  Yes  No  Don't know

If he/she has been previously married, how many times? \_\_\_\_\_

## Family Information

If you have children, are you seeking Baptism or other Sacraments for them?  Yes  No

If yes, please list name(s) and age(s)

Sacrament \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Sacrament \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Sacrament \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

Sacrament \_\_\_\_\_ Name \_\_\_\_\_ Age \_\_\_\_\_

## Additional Information (information you feel we should know)

What or who has led you to want to learn more about the Catholic faith?

What experiences have you had with the Catholic Church to-date?

Are there any other questions or concerns you may have?

*You can only send form digitally using Adobe Acrobat.*

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