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:		
Date of Birth:	Age:	
Place of Birth:[Incl	ude location (town, city, etc.), region (state, province, territory, etc.), and country]	
Grade Level:	_ School:	
P	ARENT/GUARDIAN CONTACT INFORMATION:	
List below the name(s) of paren	ts/guardian(s) and present religious affiliation, if any. Include maiden names.	
Name:	Relationship:	
Religious Affiliation:		
Home Phone:	Cell Phone:	
Email:	Occupation:	
Name:	Relationship:	
Religious Affiliation:		
Home Phone:	Cell Phone:	
Email:	Occupation:	
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, indicate who has legal custody:	
If there is a joint custody as	crangement, provide alternate full address:	

RELIGIOUS HISTORY:

1.	W1	hat, if any, is your cl	nild/teens present religious a	affiliation?		
2.	Has your child/teen ever been baptized? ☐ Yes ☐ No ☐ Unsure If you answered "Yes" to question 2; please provide the following information:					
	a) In what denomination were they baptized?					
	b) Date or approximate age when they were baptized:					
	c) Baptismal name (if different from their current name):					
	d)	Place of Baptism (na	me of church/denomination):			
	e)	Address, if known: _				
	You will need to provide a copy of their Baptismal Record as proof of Baptism, or an affidavit will need to be filled out.					
3.	rec	your child/teen was ceived: Penance (Reconcilia	baptized as a Catholic, chec ntion) □ Eucharist (F	ck the sacraments the	hey have already Confirmation	
4.		or a teen: Has he/sh □ Never married.	e been married or is he/she Currently married.		ed.	
			Family Informati	ON:		
Lis	st the	name(s) of any siblings (e.g., Sister – Jane; Stepbrother – Joh	bn).		
Re	latio	onship:	Name:		Age:	
Re	latio	onship:	Name:		Age:	
Re	latio	onship:	Name:		Age:	
Re	latio	onship:	Name:		Age:	
Relationship:		onship:	Name:		Age:	

GENERAL QUESTIONS:

1.	What or who has led your child/teen to want to know more about the Catholic Faith?
2.	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.	Summarize the reason(s) your child/teen desires to begin the Christian initiation process?