



St. Anthony of Padua Catholic Church
 1660 Elm St.
 Forest Grove, OR 97116
 Phone: 503-357-2989 Fax: 503-357-2217

Rite of Christian Initiation of Adults (RCIA) Adult Inquirer Information Form

Mission Statement

We, the Catholic Family of St. Anthony of Padua, are called to: love God, love our neighbor, and make disciples of all people by sharing the gifts God has given us.

The information on this form is held in confidence and is not shared without your permission

Today's Date: _____

Name: First: _____ Middle: _____ Last: _____

Maiden Name (if applicable): _____

Date of Birth: _____ Age: _____

Place of Birth: _____

Name of Father: _____

Name of Mother: _____

I. CONTACT INFORMATION

Mailing Address: _____

Home/Cell Phone: _____

Email: _____

II. RELIGIOUS HISTORY

1. What, if any, is your present religious affiliation? _____

2. Have you 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 you baptized? _____

b. Date or your approximate age when you were baptized: _____

c. Baptismal name (if different from current name): _____

d. Place of Baptism (name of Church/denomination): _____

e. Address/Location, if known: _____

3. If you were baptized as a Catholic, check those Sacraments you have already received:

Penance (Confession) Eucharist (First Communion) Confirmation

If you were baptized Catholic, we will need a current copy of your baptismal certificate. You will need to contact the parish of baptism and request a copy of your baptismal certificate with notations.

III. CURRENT MARITAL STATUS

Check the appropriate statement(s) below and provide any information requested beneath each statement.

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 affiliation (if any): _____

c. For you: This is my first marriage. I have been married before.

d. For your fiancé(e): This is his/her first marriage. My fiancé has been married before.

3. I am married

a. Your Spouse's Name: _____

b. Your Spouse's Current Religious affiliation (if any): _____

c. For you: This is my first marriage. I have been married before.

d. For your spouse: This is his/her first marriage. My spouse has been married before.

e. Date of Marriage: _____

f. Place of Marriage: _____
(include city, state, and country)

g. Officiating Authority of Marriage: _____
(civil government, non-Christian minister, Christian minister, Catholic minister)

4. I am married, but separated from my spouse.

5. I am divorced and I have not remarried.

6. I am a widow/widower and have not remarried since my spouse's death.

For Office Use Only:

Baptismal Certificate received

Godparent(s): _____

Sponsor: _____

Patron Saint for Confirmation: _____

Certificate issued

Recorded in Baptismal Record/Sent to Parish of Baptism