



OCIA INQUIRER INFORMATION

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

Basic Information				
First	Middle		Last	
Maiden Name (if applicable)				
Date of Birth			Current Age	
City, State, and Country of Birth				
Father's Full Name				
Mother's Full Name				
Mother's Maiden Name_				
Contact Information Ple				
Mailing Address				
☐ Home Phone			Cell Phone	
☐ Work Phone	☐ Work Phone		e-mail	
Occupation				
Religious History				
Present Religious Affiliation				
Have you ever been baptized?	□ yes	□ no	☐ not sure	
If you have been baptize	d:			
In what denomin	ation were you	baptized?		
Date and age who	en baptized			
City and State of				
If you were baptized in t				
☐ Confession?		☐ Eucharist?		☐ Confirmation?

We will need a copy of your baptismal certificate or a letter from the church verifying your baptism.

Marriage Information

Please indicate which of the following applies to you and provide the information below the statement. 1. □ I have never been married. 2. \square I am engaged to be married. Your fiancé(e)'s name Your fiancé(e)'s current religious affiliation_____ ☐ I have been married before ☐ first marriage For you: For fiancé(e): ☐ first marriage ☐ he/she has been married before 3. □ I am married. Your spouse's name Your spouse's religious affiliation ______ Date of marriage_____ Place of marriage _____ Officiating Authority: ☐ civil ☐ non-Christian ☐ Christian ☐ Catholic Cleric For you: ☐ first marriage ☐ I have been married before ☐ first marriage For spouse: ☐ he/she has been married before 4. \square I am married but separated from my spouse. 5. □ I am divorced and have not remarried. 6. \square I am a widow(er) and have not remarried since my spouse's death. If you have been previously married, please provide: (use additional form for multiple marriages) Name of former spouse (including maiden name) Date of marriage_____ Place of marriage ______ Officiating Authority: ☐ civil ☐ non-Christian ☐ Christian ☐ Catholic Cleric Has a decree of nullity been granted for this marriage: □ no □ yes If there are any marriage issues you would prefer to discuss in private, please be sure to let us know.

Family Information

Please list the names of children and other dependents, their age, and their relationship to you. Name age relationship Name____ age_____ relationship_____ age relationship_____ Name_____ age____ relationship_____ Name _____ age relationship _____ Name_____ age_____ relationship _______ Would the availability of childcare during OCIA sessions be useful to you? □ yes □ no **Sponsor Information** □ yes Do you already have a sponsor (godparent) in mind? □ no If yes, please provide sponsor's: name_____ e-mail_____

What has attracted you to the Cathol	lic Church?				
What has attracted you the Parish of	St Anne?				
What would you like to learn and ho	w would you like to	grow through OCIA?			
Do you presently intend to receive the Sacraments of Initiation at the 2024 Easter Vigil?					
□ yes	□ no	□ not sure			
	(+)				