

Reconciliation

Adult Faith Formation Inquiry Information Sheet

		Today's Date:	
Name: First	Middle:	Last:	
Maiden Name (if applicable):		
Date of Birth:	Age:		
Place of Birth:			
		Mother's Maiden Name:	
Name of Father:			
Contact Information			
Full Mailing Address:			
Phone (home):	F	Phone (cell):	
Email:			
Previous Religious His	tory		
What, if any, is your presen	t religious affiliation?		
Have you ever been baptize	ed? Yes	No	_ Not Sure
If you answered "Yes" abov	e, please provide the fol	lowing information:	
In what denomination	n were you baptized? _		
Place of Baptism (na	ame of church):		
Location, if known: _			
If you were baptized Cathol	ic, circle those sacrame	nts you have already received:	

First Eucharist

Confirmation

Current Marital Status

Check the appropr	iate statement(s) below and provide any information requested beneath each
statement.	
1. I have ne	ver been married.
2. I am enga	aged to be married.
(a) `	Your fiancé(e)'s Name:
(b) `	Your fiancé(e)'s Current Religious Affiliation:
(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(e) has been married before
3. I am marı	ried.
(a) `	Your spouse's Name:
(b) `	Your spouse's Current Religious Affiliation:
(c)	For You:
	This is my first marriage
	I have been married before
(d)	For your spouse:
	This is my spouse's first marriage
	My spouse has been married before
(e)	Date of Marriage:
(f)	Place of Marriage:
(g)	Officiating Authority of Marriage:
	(civil government, non-Christian minister, Catholic cleric)
4. I am marı	ried, but separated from my spouse.
5. I am divo	rced and I have not remarried.
6. I am a wie	dow/widower and have not remarried since my spouse's death.