

Corpus Christi Catholic Church
Contact Information
Rites of Christian Initiation for Adults Inquiry Form

Name _____ Today's date _____

Address _____ Zip _____

Home Phone _____ Work Phone _____

Email _____

Date of Birth _____ Were you Baptized? Yes _____ No _____

If yes, place _____ Church/denomination _____

Address of Church _____ City/State _____

Zip _____ Date of Baptism _____

Father's full name _____ Mother's full name _____

Please describe your religious training/education _____

Marital status _____

Name of spouse/fiancée _____

Is this your first marriage? Yes _____ No _____

Is this your spouse/fiancée's first marriage? Yes _____ No _____

Church/denomination of your spouse/ fiancée _____

Why have you come to the Church at this time?

_____ I have questions to ask of the Catholic Church

_____ I'm just looking to see what the Catholic Church has to offer

_____ I'm thinking about become a Catholic

_____ I want to become a Catholic

_____ Other (please explain) _____
