



ARCHDIOCESE OF SOUTHWARK

INITIAL INQUIRY FORM

FOR ADMISSION INTO FULL COMMUNION WITH THE CATHOLIC CHURCH

CONFIDENTIAL

THIS FORM SHOULD BE COMPLETED BEFORE THE BEGINNING OF THE RCIA PROCESS IN THE PRESENCE OF THE PRIEST OR DEACON

PLEASE PRINT THROUGHOUT

Surname	
First names	
Address	
Postcode	
Telephone number	email:
Age	If under 18, has parental consent been obtained - Yes <input type="checkbox"/> No <input type="checkbox"/> If under 18 this form must be completed in the presence of a parent/guardian
IF YOU ARE NOT A CATHOLIC	
Are you baptised? - Yes <input type="checkbox"/> No <input type="checkbox"/> - If yes, in which denomination?	
Please let us have a copy of your baptismal certificate as soon as possible	
Do you go to church on an occasional or weekly basis?	
Do you come to a Catholic church on an occasional or weekly basis?	
IF YOU ARE A CATHOLIC	
Do you come to a Catholic church on an occasional or weekly basis?	
Have you received the following sacraments?	
Baptism <input type="checkbox"/> - name and address of church	Date
<input type="checkbox"/> Eucharist (Communion)	<input type="checkbox"/> Reconciliation (Confession)
<input type="checkbox"/> Confirmation - name and address of church	Date
<input type="checkbox"/> Marriage - place and date	
FOR ALL CANDIDATES	
Marital Status	
<input type="checkbox"/> I am married to a Catholic	<input type="checkbox"/> I am married, but not to a Catholic
<input type="checkbox"/> I am divorced but not remarried	<input type="checkbox"/> I am divorced and remarried
<input type="checkbox"/> I am presently separated	<input type="checkbox"/> I have never been married before
Any other information you may wish to add	
Signature of inquirer	Date
Signature of Priest/Deacon	Date