



Chancery/Pastoral Center

**DIOCESE OF GARY**

9292 BROADWAY  
MERRILLVILLE, IN 46410-7088

219-769-9292  
219-738-9034 Fax

**ADULT INQUIRER INFORMATION FORM  
RITES OF CHRISTIAN INITIATION OF ADULTS**

Today's date: \_\_\_\_\_

*Information on this form is held in strictest confidence and is not shared without your permission.*

**GENERAL INFORMATION**

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Name of Parish \_\_\_\_\_

Parish Address \_\_\_\_\_  
(full address)

Inquirer's Name \_\_\_\_\_  
First Middle Family Surname

Maiden Name (if applicable) \_\_\_\_\_

Birth date \_\_\_\_\_

Place of Birth \_\_\_\_\_  
Hospital City State

Mother \_\_\_\_\_  
First Middle Confirmation

\_\_\_\_\_ Maiden Family Surname

Religion (If Christian, then include Faith Tradition) \_\_\_\_\_

Father \_\_\_\_\_  
First Middle Confirmation

\_\_\_\_\_ Family Surname

Religion (If Christian, then include Faith Tradition) \_\_\_\_\_

Inquirer's Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_