

INFORMATION FOR BAPTISM
(Please obtain real and complete names – no nicknames)

Name of Child: _____
(first) (middle) (last)

Home Address: _____

City: _____ State: _____ Zip code: _____ Phone no.: _____

Date of Birth: _____ **Place of Birth:** _____

Sex: Male ___ Female ___

Father's Name: _____ **Date of Birth:** _____

Mother's Name: _____ **Date of Birth:** _____

Parents married? Yes ___ No ___ **in Catholic Church?** Yes ___ No ___

Name of Church: _____

(Godparents: There should be one godfather AND one godmother. Both should be practicing Roman Catholics; however, one may be a baptized non-Catholic from another Christian Faith.)

Godfather: _____ **His religion:** _____
(first) (last)

Godmother: _____ **Her religion:** _____
(first) (last)

BAPTISMS ARE CELEBRATED ON THE SECOND SUNDAY AT 12:15PM. PARENTS ARE REQUIRED, AND GODPARENTS ARE INVITED, TO ATTEND THE CATECHESIS (INSTRUCTION CLASS) WHICH IS HELD ON THE FIRST SUNDAY OF THE MONTH AT 12:15PM.

Have the parents already attended the catechesis? Yes ___ No ___

Was the child baptized privately? / in hospital? Yes ___ No ___

REQUESTED DATE FOR BAPTISM: _____

Are there any other children in the family? Yes ___ No ___
(list names and ages of other children)

_____	_____	_____	_____
(name)	(DOB)	(name)	(DOB)
_____	_____	_____	_____
(name)	(DOB)	(name)	(DOB)
_____	_____	_____	_____
(name)	(DOB)	(name)	(DOB)