

# SAINT BERNADETTE PARISH

1020 North Main Street • Randolph • MA 02368

www.stbernadette.us

Phone (781) 963.1327 Fax (781) 963.0198

inquiries@stbernadette.us

## INFORMATION FOR BAPTISM

(Please write real and complete names – no nicknames)

Name of child: \_\_\_\_\_  
(first) (middle) (last)

Date of Birth: \_\_\_\_\_ Place of Birth: (city & state): \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Father's Name: \_\_\_\_\_  
(first name) (last name)

Mother's Maiden Name: \_\_\_\_\_  
(first name) (maiden name)

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Parents married? Yes \_\_\_ No \_\_\_ in Catholic Church? Yes \_\_\_ No \_\_\_

Name of Church: \_\_\_\_\_

\*Godparent has to be a fully-initiated practicing Roman Catholic,  
having received their Baptism, First Communion, and Confirmation .

Godfather: \_\_\_\_\_ Religion: \_\_\_\_\_  
(first) (last)

Godmother: \_\_\_\_\_ Religion: \_\_\_\_\_  
(first) (last)

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

Have the parents already attended the catechesis? Yes \_\_\_ No \_\_\_

REQUESTED DATE FOR BAPTISM: \_\_\_\_\_

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

\_\_\_\_\_