

# BAPTISM REGISTRATION

FOR OFFICE USE:  
REGISTERED \_\_\_\_\_  
BAPTISMAL CLASS \_\_\_\_\_

Child's Name: \_\_\_\_\_ Male/Female: \_\_\_\_\_  
(first, middle, last)

For legal and privacy reasons, please verify that one of the parents is requesting. \_\_\_\_\_ (initial)

Father's Name: \_\_\_\_\_ Religious Affiliation: \_\_\_\_\_  
(first, middle & last name)

Mother's Name: \_\_\_\_\_ Religious Affiliation: \_\_\_\_\_  
(first, middle, (maiden), last name)

Child's Date of Birth: \_\_\_\_\_

Child's City of Birth: \_\_\_\_\_

Confirmed Catholic Godparents: (Baptized, Confirmed and Practicing Catholic over the age of 16)

Other than Confirmed Catholic Godparents (and religious affiliation):

\_\_\_\_\_ Religious Affiliation: \_\_\_\_\_

Church for Baptism: \_\_\_\_\_ Priest/Deacon \_\_\_\_\_

Date/Day/Time of Baptism: \_\_\_\_\_

If the Baptism is during Mass, how many pews would you like reserved for parents, grandparents and godparents of the child being Baptized? (typically 2 or 3) \_\_\_\_\_

If the Baptism is after Mass, you are welcome to sit anywhere during Mass.

Baptism Preparation Date: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Information: Email Address: \_\_\_\_\_

Parents Marital Status: (please circle)      **Single**      **Married**

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Are parents current members \_\_\_\_\_ verified \_\_\_\_\_ If not, permission given from current parish? \_\_\_\_\_

Scheduled on calendar \_\_\_\_\_

Certificate printed \_\_\_\_\_

Certificate proof read \_\_\_\_\_

Weekly clergy note \_\_\_\_\_

Email sent to parents \_\_\_\_\_

Entered into database \_\_\_\_\_

Entered into Sacramental Registry \_\_\_\_\_

Updated 7-18-19