

BAPTISMAL REGISTRATION FORM

PLEASE PRINT CLEARLY

PLEASE USE ONLY FULL PROPER NAMES, NO NICKNAMES

NAME OF CHILD \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

DATE & TIME OF BAPTISM \_\_\_\_\_

NAME OF FATHER \_\_\_\_\_

RELIGION OF FATHER \_\_\_\_\_

FIRST AND MAIDEN NAME OF MOTHER \_\_\_\_\_

RELIGION OF MOTHER \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

CITY/STATE/ZIP+4 \_\_\_\_\_

PHONE NUMBER: ( \_\_\_\_\_ ) \_\_\_\_\_ e-mail \_\_\_\_\_

SPONSOR/GODFATHER \_\_\_\_\_

RELIGION \_\_\_\_\_

SPONSOR/GODMOTHER \_\_\_\_\_

RELIGION \_\_\_\_\_ (Godparents must be at least 16 years old, a active Confirmed Catholic and not be one of the parents. Only one godparent of each sex is permitted however only one is necessary. One non-Catholic Christian is permitted as a witness.)C. 873-874

WILL EITHER GODPARENT BE REPRESENTED BY PROXY? YES NO NAME(S) OF PROXY(S) \_\_\_\_\_

ARE YOU (PARENTS) REGISTERED AS MEMBERS OF IHM PARISH? YES NO

ARE YOU (PARENTS) PRESENTLY (A) PRACTICING CATHOLIC(S)? YES NO ALWAYS MONTHLY OCCASIONALLY RARELY NEVER

WHERE WERE YOU (PARENTS) MARRIED? (CHECK ONE) \_\_\_\_\_ CATHOLIC CHURCH; \_\_\_\_\_ OTHER CHURCH (WITH PERMISSION OF CATHOLIC CHURCH? YES NO) \_\_\_\_\_ CIVIL CEREMONY (COURTHOUSE) \_\_\_\_\_ NOT MARRIED.

(If never married, the father of the child must submit a signed statement acknowledging paternity if his name is to appear in the Baptismal registry and on any subsequent certificate.)

HAS THE CHILD BEEN BAPTIZED PREVIOUSLY (EMERGENCY OR OTHERWISE)? YES NO

DO NOT WRITE BELOW THIS LINE-OFFICE USE ONLY \*\*\*\*\*

DATE OF BAPTISMAL PREPARATION CLASS \_\_\_\_\_ ATTENDED \_\_\_\_\_

CELEBRANT OF BAPTISM \_\_\_\_\_

NOTES: \_\_\_\_\_