

Today's Date _____

BAPTISM REGISTRATION FORM

Parish of Baptism _____

Please Print !

Full Name of Child _____

Residence _____

Phone _____ e-mail _____

Date of Birth _____ City/State of Birth _____

Father's Full Name _____

Religion of Father _____ Place of Birth of Father _____

Mother's Full Name (Maiden) _____

Religion of Mother _____ Place of Birth of Mother _____

Were parents married by a Catholic Priest? _____

Child's Brothers & Sisters (names/ages) _____

Godfather's Full Name: _____

Is Godfather Catholic? _____

Godmother's Full Name _____

Is Godmother Catholic? _____

Is either Godparent represented by Proxy? _____

Full Name of Proxy(s) _____

Was the child adopted? _____ Was the child privately baptized? _____

Name of Priest or Deacon performing baptism _____

Parish registered in _____

Date & Time of Baptism _____ Confirmed date/time? _____