



Baptismal Form

Name of Child (include middle name): _____

Sex of Child: Male Female

Date of Birth: _____

City of Birth: _____

Father's name: _____

Catholic? Yes No If yes, what parish?: _____

If no, what Church do you attend?: _____

Mother's name (include Maiden name): _____

Catholic? Yes No If yes, what parish?: _____

If no, what Church do you attend?: _____

Home Address: _____

Phone: _____

Email: _____

Godfather's name: _____

Catholic? Yes No

If no, what Church do they attend? _____

Godmother's name: _____

Catholic? Yes No

If no, what Church do they attend? _____

If your child will be Baptized at Mass, How many pews will you need reserved?

Office Only

Date of Baptism: _____

Priest/Deacon Administering: _____

Signature: _____

___ Certificate to Family

___ Recorded in Baptism book

___ Recorded in Census