

# BAPTISM REGISTRATION FORM

TODAY'S DATE: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

[PARENTS: *In order to begin the process for baptism, please complete this form and present it to the Parish Office.*]

**FAMILY NAME:** \_\_\_\_\_ **PHONE:** ( )-( )-( )

**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_

How long have you lived in this area? \_\_\_\_\_

What is the name of the parish at which your family is registered and regularly attends Mass? \_\_\_\_\_

How frequent is your attendance at Mass? \_\_\_\_\_

**MARITAL STATE:** Married in the Catholic Church ( ) Civil marriage only ( ) Divorced ( )

Not married; living together ( ) Single parent ( )

**DATE OF MARRIAGE:** Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

**NAME OF THE CHURCH:** \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

**NAME OF CHILD'S FATHER:** \_\_\_\_\_ Religion: \_\_\_\_\_

**NAME OF CHILD'S MOTHER:** \_\_\_\_\_ **MAIDEN NAME:** \_\_\_\_\_ Religion: \_\_\_\_\_

**CHILD'S BAPTISM NAME:** \_\_\_\_\_

Date of Birth: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

Where was your child born? City: \_\_\_\_\_ State: \_\_\_\_\_

**COMPLETE NAME OF GODFATHER:** \_\_\_\_\_

Religion: \_\_\_\_\_ Parish: \_\_\_\_\_

( ) He is a Catholic?

( ) He is at least sixteen years of age?

( ) He is baptized, has been confirmed and has made his first Communion?

( ) If he is married, is he married according to the norms of the Catholic Church?

From which parish can the pastor obtain his marriage certificate? Parish: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

**COMPLETE NAME OF GODMOTHER:** \_\_\_\_\_

Religion: \_\_\_\_\_ Parish: \_\_\_\_\_

( ) She is a Catholic?

( ) She is at least sixteen years of age?

( ) She is baptized, has been confirmed and has made her first Communion?

( ) If she is married, is she married according to the norms of the Catholic Church?

From which parish can the pastor obtain her marriage certificate? Parish: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

**We plan to attend the pre-baptismal classes identified below, and we will assure that the godparents attend as well:**

**Dates for classes:** \_\_\_\_\_ (Please note these dates in your calendar.)

## FOR PARISH OFFICE USE ONLY

Attendance: Class#1-( ) M ( ) F ( ) GF ( ) GM Class #2 -( ) M ( ) F ( ) GF ( ) GM

Baptism is set for: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_ Place: \_\_\_\_\_

The baptism was celebrated: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_ By: (Priest or Deacon): \_\_\_\_\_

( ) Registered in book ( ) Information in computer ( ) Certificate delivered/mailed