

Registration for Baptism

Church of Baptism: St. Anthony St. Augustine St. Dominic

Baptismal Date: _____ Time: _____

Child's Name: _____ Sex: _____

Birth Date: _____ Place of Birth: _____ State: _____

Father: _____

Mother: _____ Maiden: _____

Address: _____

_____ Phone: _____

Father's Religion: _____ Mother's Religion: _____

Marital Status: Married in Catholic Church

Married outside of Church

Single

Church of Marriage: _____

City of Marriage: _____

Date of Marriage: _____

GODPARENTS: At least one of the godparents must be confirmed, at least 16 years old, a practicing Catholic and, if married, in a valid marriage approved by the Church.

Godfather: _____ Religion: _____

Godmother: _____ Religion: _____

Will either godparent be represented by a Proxy? Yes No

Was the child privately baptized? Yes No

Was the child adopted? Yes No

Have the parents attended a Baptismal Prep class within the last 5 years? Yes No

Church where Baptismal Prep class was taken: _____

City: _____