

PRE-BAPTISMAL INFORMATION

FAMILY NAME _____ REGISTERED IN PARISH __ Y __ N

FATHER _____ MOTHER _____ MAIDEN NAME _____

ADDRESS & CITY _____

HOME PHONE _____ MARRIED __ Y __ N WHERE _____

NAME OF CHILD(REN) TO BE BAPTISED

1. _____ / _____ / _____
FIRST MIDDLE LAST

CHRISTIAN NAME TO BE USED _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

GODFATHER _____ ADDRESS _____

PRACTICING CATHOLIC __ Y __ N PARISH & CITY _____

GODMOTHER _____ ADDRESS _____

PRACTICING CATHOLIC __ Y __ N PARISH & CITY _____

2. _____ / _____ / _____
FIRST MIDDLE LAST

CHRISTIAN NAME TO BE USED _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

GODFATHER _____ ADDRESS _____

PRACTICING CATHOLIC __ Y __ N PARISH & CITY _____

GODMOTHER _____ ADDRESS _____

PRACTICING CATHOLIC __ Y __ N PARISH & CITY _____

First born child __ Y __ N

Attended baptismal class in past __ Y __ N

When _____

Date will attend baptismal class _____ Godparents can __ cannot __ attend class

DATE OF BAPTISM _____