Baptism Application Form

Required:

1) A copy of one of the Catholic Parents Baptism or Profession of Faith Certificate
2) A copy of one of the Catholic Godparent's Baptism Certificate
3) A copy of the Child's Birth Certificate
4) Attended a Baptism Prep Class
5) Signed

Child's Last Name and Given Names:

_____

Male or Female:

_____

Child's Date of Birth: Month/Day/Year

_____

Age of Child of/at Baptism in month or year:

_____

Child's Place of Birth:

_____

If you have completed a Baptism Preparation Course please indicate the place, address, and date: (letter or copy of certificate)

_____

_____

Please provide us with a preferred Baptism Date
(will depend on availability of Officiant)

_____

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Father's Full Legal Name AND Contact Number AND Address and Religion

_____

_____

Signature acknowledging that my child will be baptized according to the Roman Catholic Rite:

_____

Mother's Full Legal Name (include Maiden Name) AND Contact Number AND Address
(if different from above) and Religion:

_____

_____

Signature acknowledging that my child will be baptized according to the Roman Catholic Rite:

_____

Preferred Email Address:

_____

Godfather's Name and Religion:

_____

Godmother's Name and Religion:

_____