



Baptism Information

Child's Information

Child's First Name Middle Last Name

Male Female Date of Birth _____

City and State of Birth (*This information must match birth certificate.*) If child is not born yet, leave this blank.

Parents' Information

Father's First Name Middle Last Name

Catholic: Yes No

Mother's First Name Middle Maiden Name

Catholic: Yes No

Street Address City State Zip Code

Home Phone Cell Phone

Email Address

Godparent Information

Godfather's First Name Middle Last Name

Godmother's First Name Middle Last Name

** If there is only one Catholic godparent, a baptized person who belongs to a non-Catholic Christian church may participate as a Christian Witness to the baptism, but does not take on the role or title of godparent.*

Christian Witness First Name Middle Last Name

We/I affirm that all the information provided above is true. We/I are requesting the sacrament of Baptism for our child through the parish. It is our intent to raise our child as a Roman Catholic.

Father's Signature Date Mother's Signature Date