

BAPTISMAL INFORMATION FORM

Date of Baptism _____

Name of person to be baptized _____
(First) (Middle) (Last)

Father's Name _____
Last Name First Name Middle Initial

Mother's Name _____
Maiden Name First Name Middle Initial

Place of Birth _____
City State

Date of Birth _____

Registered in Parish? _____

Address _____

Phone Number _____

Email address _____

Sponsor's Name _____ Catholic _____ Yes _____ No

Sponsor's Name _____ Catholic _____ Yes _____ No

(at least one sponsor must be Catholic – confirmed and at least 16 years of age)
(Christian witness must be a person baptized in another Christian faith and practicing their faith)

Baptism Preparation Classes: Session 1 _____

Session 2 _____

Baptized by: _____
(Priest or Deacon)