SAINT ANTHONY OF PADUA CATHOLIC PARISH

Baptismal Registration for a Child

Child's full legal name:_____

Circle one: (Boy) / Girl D.O.B.: _____/_____/_____ City of birth: _____

Father's legal name: _____

Church or Religion: _____ Baptized: (Y) / (N) Confirmed: (Y) / (N)

Mother's (maiden) name:_____

Church or Religion: _____Baptized: (Y) / (N) Confirmed: (Y) / (N)

Parents address: _____ Phone: (_____) _____-_____

_____ E-Mail: _____

City State Zip

Parents Marital status (circle one) Married Single

Where were you married? (circle one) Church Civil Service

In what city, church, and by whom were your parents married?_____

_____

Church in which parents are registered: _____

Are the parents practicing Catholics? _____

Additional notes: _____

Requested Sunday Baptismal date: _____

Month Date Year Time

Sponsor Information

Godfather's legal name: _____Parish: _____

Address:_____

Godmother's legal name: _____Parish: _____

Address:_____

For office use

Date and time of baptism_____ Minister of baptism_____

Date attending baptism prep class_____ Census updated _____

Recorded in Baptism record: _____ Certificate mailed _____