

## APPLYING FOR BAPTISM

Hello and welcome to Saint Augustine Catholic Church! We are happy to assist you with your child's journey to know and love God. **Please keep Pages 1 and 2** as they contain important information. Take time to read through the requirements below; when ready, fill out the application, choose the best godparents, and submit the needed paperwork. God bless!

### **REQUIREMENTS:**

1. **Catholic parents.** If one parent is *not* Catholic, a letter of consent by the non-Catholic parent is to be submitted, stating permission and willingness to have the child grow up in the Catholic faith.
2. **At least one Godparent (if choosing two: one male and one female).** They must be *practicing* Catholics, at least 16 years old, and have received the Sacraments of Initiation: Baptism, Confirmation, and Eucharist.
3. **Participation in a St. Augustine Baptism Prep Class for parents *and* godparents – and watching *Reborn* Episode 2 before the Prep Class.** Instructions on accessing the video will be sent in a confirmation email (after all paperwork is turned in).
4. **Submission of the following:** (please use this checklist before submitting)

- \_\_\_\_\_ Completed baptismal application form, including answers to questions
- \_\_\_\_\_ Completed Godparent Form(s)
- \_\_\_\_\_ Permission Forms (if necessary)
- \_\_\_\_\_ Copy of child's birth certificate
- \_\_\_\_\_ Offering of \$125 cash or check made out to St. Augustine Catholic Church

**The Schedules of Prep Classes and of Baptisms are on Page 2. Please look over the information and choose your preferred dates, noting that there should be at least one month between the prep class and the baptism.**

**Preferred Date of Prep Class** \_\_\_\_/\_\_\_\_/\_\_\_\_

*This date must be at least one month before the date of the baptism.*

**Preferred Date of Baptism** \_\_\_\_/\_\_\_\_/\_\_\_\_

*This date must be at least one month after the date of the prep class.*

**After the prep class is taken, an email with the confirmed date of the baptism will be sent.**

For additional information, please contact the parish at (650) 873-2282.

Schedule of Prep Classes (attend one):

1<sup>st</sup> and 3<sup>rd</sup> Monday of the month – **Virtual 7:00 PM to 8:30 PM**

Zoom ID and pass code will be sent in the confirmation email.

Prep Classes for 2026\*:

January 6  
January 19  
February 2  
March 2  
March 16  
April 6  
April 20  
May 4  
May 18  
June 1  
June 15  
July 6  
July 20  
August 3  
August 17  
September 14  
October 5  
October 19  
November 2  
November 16  
December 7

\*No classes on February 16 and September 7

Schedule of Baptisms (no baptisms during Lent – February 18 to April 5):

**2<sup>nd</sup> & 4<sup>th</sup> Saturday**

**12:00 PM** (Max: 6 children)

January 10, January 24, February 7, April 11, April 25, May 9, May 23, June 13,  
June 27, July 11, July 25, September 12, September 26, October 10, October 24,  
November 14, November 28, December 12, December 26

**1<sup>st</sup> Sunday**

**2:30 PM** (Max: 6 children)

January 4, February 1, May 3, June 7, July 5, August 2,  
September 6, October 4, November 1, December 6

**3<sup>rd</sup> Sunday within the Mass**

**12:30 PM** (Max: 2 children)

January 18, February 15, April 19, May 17, June 21, July 19, August 16,  
September 20, October 18, November 15, December 20

# BAPTISMAL APPLICATION FORM

Saint Augustine Catholic Church  
3700 Callan Blvd, South San Francisco CA 94080

Phone: 650-873-2282 E-mail: [staugustinessf@aol.com](mailto:staugustinessf@aol.com)

Child's Name

Sex M F

FIRST MIDDLE LAST

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ City & State of Birth \_\_\_\_\_

Address \_\_\_\_\_

STREET CITY STATE ZIP CODE

Telephone Number (s) \_\_\_\_\_

E-mail (s) \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

FIRST MIDDLE LAST

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_

FIRST MAIDEN NAME

Are the parents registered at Saint Augustine Church? Yes No

(If No, please obtain a permission letter from your parish. If not registered at any parish, consider making Saint Augustine your home parish.)

Marital Status of Parents: Catholic Church Civil Other \_\_\_\_\_

Godfather's Name \_\_\_\_\_ Religion \_\_\_\_\_

FIRST MIDDLE LAST

Godmother's Name \_\_\_\_\_ Religion \_\_\_\_\_

FIRST MIDDLE LAST

Preferred Date of Prep Class \_\_\_\_/\_\_\_\_/\_\_\_\_ (at least one month before date of baptism)

Preferred Date of Baptism \_\_\_\_/\_\_\_\_/\_\_\_\_ (at least one month after date of prep class)

## For Office Use Only:

Application and Fee Received On \_\_\_\_/\_\_\_\_/\_\_\_\_ By \_\_\_\_\_ [ Cash / Ck # \_\_\_\_\_ ]

Date of Baptism \_\_\_\_/\_\_\_\_/\_\_\_\_

Celebrant \_\_\_\_\_

Permanent Record Book # \_\_\_\_\_

Certificate mailed on \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please answer the following questions as best and honestly as you can. (Submit with your application.)**

1. Why is it important for you as parents to have your child baptized? (What does it mean to you that *you* are a baptized Catholic? What impact does it have on your life?)\_\_\_\_\_

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2. What are some practical things you will do as parents to foster your child's faith formation in the Catholic Church? (How do you see yourself helping your child grow in their relationship with God?)\_\_\_\_\_

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3. Understanding the requirements for godparents, what qualities/virtues do you see in the people you are choosing as the godparents of your child? How are they going to be the best examples for your child?

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## BAPTISM GODPARENT FORM

Godparent's Name: \_\_\_\_\_

First

Middle

Last

Godchild's Name: \_\_\_\_\_

Godparent's email: \_\_\_\_\_

Godparent's phone: \_\_\_\_\_

Godparent's parish: \_\_\_\_\_

City

State

(Arch)Diocese

**Godparent's attestation:** (Checking means you acknowledge that the following statements are true.)

\_\_\_\_\_ I am a fully initiated Catholic, having received the Sacraments of Initiation:

Baptism

Confirmation

and Eucharist

\_\_\_\_\_ I am at least 16 years old.

\_\_\_\_\_ I am a practicing Catholic.

Please answer the following questions:

How are you involved in your parish? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How shall you support the parents in raising their Catholic child? How do you see yourself helping your godchild grow in his/her relationship with God? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Godparent's signature: \_\_\_\_\_