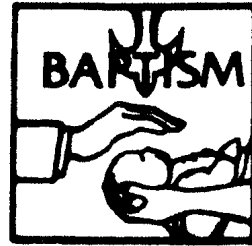


Mother of Perpetual Help Church  
200 North Lange  
Maryville, Illinois 62062



Sacrament of Baptism – Registration Form  
(Please print and give complete names)

Full name of child \_\_\_\_\_  
Date of birth \_\_\_\_\_ City of birth \_\_\_\_\_

Father's full name \_\_\_\_\_

Religion \_\_\_\_\_

Mother's full name (include maiden name) \_\_\_\_\_

Religion \_\_\_\_\_

Were you married by a priest?  Yes  No

Family address \_\_\_\_\_

Home phone \_\_\_\_\_

Godfather full name: \_\_\_\_\_ Catholic  Yes  No

If Catholic, name and address of parish \_\_\_\_\_

(Office Use -- date letter sent to godparent's parish:) \_\_\_\_\_

Godmother full name: \_\_\_\_\_ Catholic  Yes  No

If Catholic, name and address of parish \_\_\_\_\_

(Office Use -- date letter sent to godparent's parish: \_\_\_\_\_)

Was the baby baptized privately in emergency?  Yes  No

(Office Use) Date of seminar \_\_\_\_\_

(Office Use) Date of Baptism \_\_\_\_\_

Completed registration