

St. Olaf, Patron of Norway Baptism Registration Form

Before Baptism, please fill out this form.

Today's Date _____

Name of Child _____
First Middle Last

Date of Birth _____
Month Day Year

City/State of Birth _____

Parents' Address

Street/City _____

State/Zip _____

Telephone _____; Cell Phone _____; Email _____

Father's Name _____
First Middle Last

Religion of Father _____

Mother's Maiden Name _____
First Middle Surname

Religion of Mother _____

Requested Date of Baptism _____
Month Day Year

Godfather's Name _____ Catholic? () yes () no

Godmother's Name _____ Catholic? () yes () no

Were Parents married by a Priest? () yes () no

Is either Godparent represented by Proxy? () yes () no

Name of Proxy(s) _____

Was the child adopted? () yes () no

Was the child privately baptized? () yes () no

Office Use only

Name of Priest or Deacon _____

Date of Baptism _____

Attended Baptism Class: () yes () no

Received Letters of Good Standing for Both Godparents? () yes () no

Date in Parish Soft _____ by _____; Date in Parish Register _____ by _____

Date in Sacramental Register 4.0 (program) _____; by _____; Notification Sent _____ by _____