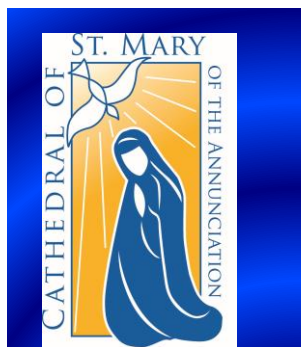


# Baptism Registration Form



## Cathedral of Saint Mary of the Annunciation

615 William Street  
Cape Girardeau, Missouri 63703  
Telephone: 573-335-9347  
Fax Number: 573-335-0649  
Website: [www.stmarycathedral.net](http://www.stmarycathedral.net)  
E-mail: [smparish@stmarycathedral.net](mailto:smparish@stmarycathedral.net)

Parents, you are  
the first teachers of your child  
in the ways of the faith  
May you be the best of teachers,  
bearing witness to the faith

Today's Date \_\_\_\_\_

### Times available for the celebration of a Baptism:

- ☐ During the 4:00 PM Mass on Saturday
- ☐ During the 5:30 PM Mass on Saturday
- ☐ After the 5:30 PM Mass on Saturday @ 6:30
- ☐ During the 10:30 AM Mass on Sunday
- ☐ After the 10:30 Mass on Sunday @ 11:30, except for First Sunday of the Month

### To Arrange a Date

Please contact Donna at the parish office  
(573-335-9347) to arrange a date for the Baptism.

### Infant Baptism:

- ☐ Pre-register for class
- ☐ Weekly attendance by the Catholic parent(s) at Sunday Mass and registration in the parish is required to have your child baptized
- ☐ Parents from outside the parish should have a letter from the pastor of the parish in which they are registered

### Godparents:

- ☐ Godparents are Catholic, actively practicing faith by weekly Sunday Mass attendance; at least 16 years of age, Confirmed and registered at Cathedral of St. Mary of the Annunciation. (There is the possibility of one Christian witness who is an active member of a Christian church. The "Christian witness" must be baptized in his or her denomination.)
- ☐ A Catholic godparent registered in a parish other than St. Mary Cathedral Parish is asked to provide from their pastor a letter of recommendation regarding their role as a godparent.
- ☐ Godparents include a godmother and godfather.
- ☐ If one or both of the godparents cannot be present for the baptismal ceremony assigned proxies may stand in their place.

**Please print all information clearly to help assure accurate transfer to the Sacramental Register.**

Full Name of child to be baptized \_\_\_\_\_

Date of Birth \_\_\_\_\_ Male/Female (Circle one) City of Birth \_\_\_\_\_

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

Mother's full name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Maiden name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Parents married by a priest in the Catholic Church:

☐ Yes

☐ No

Parents receiving mail and registered in St. Mary Cathedral Parish:

☐ Yes

☐ No

Name of godfather \_\_\_\_\_ Proxy \_\_\_\_\_

Name of godmother \_\_\_\_\_ Proxy \_\_\_\_\_

Christian Witness \_\_\_\_\_ Religion \_\_\_\_\_

Minister of Baptism \_\_\_\_\_ Date of Baptism \_\_\_\_\_