

St. Mary Cathedral Baptism Registration Form

Child's Name:				
Child's Name:	(First)	(Middle)	(Last)	
Date of Birth:		City:	State:	
Mother's Name: _	(First)	(Middle)	(Last)	
	(First)	(Middle)	(Last)	
Phone Number:		Email address:		
Home Address:				_
City/State:		Zip:		
Mother's Maiden	Name:			
Religion of Father	::	Mother:		_
Are you registered	l at St. Mary C	athedral? []Yes []No		
If not, what is the	name and addr	ress of your parish?		
		Priest? [] Yes [] No		
Baptism Date Req	uest:			
Baptism Time Rec	quest:			

Catholic Godmother's Full Name:
Catholic Godfather's Full Name:
Photo and Publicity Consent: I understand that promotional pictures and videos (individual and group) of me and my family members (including minor children) may be taken during parish, school, diocesan and other events. By checking the box below, I hereby give permission for images, names, ages, comments, parish/school, verbal or written remarks to be used for news and promotional materials by print, broadcast or internet for St. Mary Cathedral and School. This permission will remain in force unless withdrawn in writing by a letter to the Parish Office.
Please email the completed form to: parishoffice@stmarycathedral.org AND mswitalski@stmarycathedral.org or drop off/mail to: St. Mary Cathedral 606 N. Ohio Ave Gaylord MI 49735 (989)732.5448