

Baptism Information Form:

Name of Child: _____

Residence: _____

Phone Number: _____

Date of Birth: _____

Place of Birth: _____

Requested Date of Baptism: _____

Father's Name: _____

Religion of Father: _____

Mother's Maiden Name: _____

Religion of Mother: _____

Were Parents married by a Catholic Priest: _____

Godfather: _____

Religion of Godfather: _____

Godmother: _____

Religion of Godmother: _____

Was child privately baptized? _____

Was the child adopted? _____