



# BAPTISM

## INFANT BAPTISM REQUEST FORM – Page 1

PLEASE COMPLETE BOTH SIDES OF THIS FORM.  
PLEASE PRINT VERY CLEARLY!

Parents should see to it that infants are baptized as soon as possible after birth!

Today's Date: \_\_\_\_\_  
Month Day Year

CHILD'S NAME: \_\_\_\_\_  
First Name Middle Name Last Name

Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Month Day Year City State Country

Please attach a copy of the Child's Birth Certificate or Adoption Papers  
(or bring a copy to the Baptism Preparation Session).

### PARENTS' FULL NAMES:

Father: \_\_\_\_\_  
First Name Middle Name Last Name

Mother: \_\_\_\_\_  
First Name Middle Name Maiden Name

Address: \_\_\_\_\_  
Number & Street Apt.# City State Zip Code

Home Phone: \_\_\_\_\_ Business Phone \_\_\_\_\_  
Area Code Number Area Code Number Extension

Cell Phone: \_\_\_\_\_  
Area Code Number

Email Address: \_\_\_\_\_

Parents' Marital Status:  Married  Single  Separated  
 Non-Married Couple  Widowed  Divorced

Parents' Parish: St. Paul the Apostle \_\_\_\_\_  
Other (Name of Parish) \_\_\_\_\_

Non-Parishioners must bring a Letter of Permission from their own Parish to the Preparation Session..

### GODPARENTS:

One or at most two Godparents may be chosen. If two, one must be male and one female. Godparents must be practicing Catholics, at least 16 years old, who have been confirmed and received their First Communion. If there are two Godparents, one of them may be a baptized non-Catholic "Christian Witness."

(1) \_\_\_\_\_ Catholic?  Yes  No  
First Name Middle Name Last Name

(2) \_\_\_\_\_ Catholic?  Yes  No  
First Name Middle Name Last Name



# Baptism

Infant Baptism Request Form – Page 2

**Baptisms will be celebrated the second Sunday of every month at 2:00 p.m.**

**Preparation Meeting:**

Parents must attend a Baptism preparation session prior to the date of the Baptism. Baptism preparation sessions are offered on the day before the Baptism (Saturday) at 10:00 a.m.

You may also attend a preparation class somewhere else, and provide proof of attendance with this application.

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## FOR OFFICE USE ONLY

Baptized by (Priest /Deacon): \_\_\_\_\_

Baptism Preparation Session: \_\_\_\_\_ By: \_\_\_\_\_

Month Day Year

Recorded in Baptismal Register: \_\_\_\_\_ By: \_\_\_\_\_

Month Day Year

Baptismal Certificate Sent: \_\_\_\_\_ By: \_\_\_\_\_

Month Day Year