

BAPTISM INFORMATION SHEET

CHILD'S BAPTISMAL NAME: _____

Girl _____ or Boy _____

Date of Birth _____ **Place of Birth** _____

FATHER'S NAME _____

(first)

(middle name)

(last name)

Age _____

Address _____ Ph# _____

Catholic _____ Registered at: St. John's _____ Other _____

Non- Catholic _____ Denomination of Church of Attendance _____

I am not Catholic but interested in learning more about the Catholic Church YES ___ NO ___

MOTHER'S NAME _____

(first)

(maiden name)

(last name)

Age _____

Address _____ Ph# _____

Catholic _____ Registered at: St. John's _____ Other _____

Non- Catholic _____ Denomination of Church of Attendance _____

I am not Catholic but interested in learning more about the Catholic Church YES ___ NO ___

FATHER AND MOTHER ARE MARRIED IN THE CATHOLIC CHURCH

Yes _____ No _____ Parents not married _____

Name of Church Where Married _____

When Married: _____ Minister: _____

MASS ATTENDANCE

Father attends Mass _____ regularly _____ occasionally _____ seldom

Mother attends Mass _____ regularly _____ occasionally _____ seldom

SHARING YOUR FAITH:

Father and Mother intend to share your Catholic faith with your baptized Child. This includes preparation and reception of the Sacraments of Eucharist, Reconciliation and Confirmation

Please check one: YES ___ NO ___

GODPARENTS: A letter of suitability is needed from your church if not from St. John's

Name of Godfather _____ Age: _____

Address _____

_____ Catholic _____ Non- Catholic, What Religion? _____ Parish: _____

Married: YES ___ NO ___

Name of Godmother _____ Age: _____

Address _____

_____ Catholic _____ Non- Catholic, What Religion? _____ Parish: _____

Married: YES ___ NO ___

(over)

INSTRUCTIONS:

Have parent(s) previously attended Baptism instructions

YES _____

Where & When _____

NO _____

We will attend instructions on _____
taught by _____

EXPECTED DATE OF BAPTISM

_____ to be baptized by Deacon _____ Father _____

SIBLINGS:

Name: _____ DOB: _____ Age: _____

Baptized: YES ___ NO ___

Name: _____ DOB: _____ Age: _____

Baptized: YES ___ NO ___

Name: _____ DOB: _____ Age: _____

Baptized: YES ___ NO ___

TO BE COMPLETED FOLLOWING BAPTISM

Minister of Baptism _____

Baptism Date _____

Baptism Registered _____ By _____ Date _____