Baptism Preparation Information

Name of Child: _____ Male Female
First Middle Last

Residence: _____

Phone Number: _____
Home Cell

Date of Birth: _____ City and State of Birth: _____

Is the child adopted? _____ Were parents married by a Catholic Priest? Yes No

Name of Father: _____ Religion: _____
First Middle Last

Name of Mother: _____Religion: _____
First Middle **Maiden**

Are both parents in favor of Baptism **Yes** **No**

Godfather: _____ Religion: _____
First Middle Last

Godmother: _____ Religion: _____
First Middle Last

Is either Godparent represented by Proxy? _____

Name of Proxy: _____ Religion: _____
First Middle Last

Date requested for Baptism: _____

Date attended Baptism Class: _____