

Request for Baptism

Date of Request: _____

Family Name: _____

Registered with parish? Yes No

Name of child	Male / Female
Date of birth	
City and state of birth	
Date requesting Baptism	
At which church?	By which priest?
Family Address	
Primary Phone	
Email address	

	First	Middle	Last	Religion
Father's name				
Mother's maiden name				
Married by a Catholic priest?	Yes	No	Baptism Class?	When

	Sponsor eligibility received?
Godfather	
Godmother	
Proxy?	

For office use:

Privately Baptized?	
Adopted?	
Traditional Latin Rite?	Knights of Columbus notified?
Actual date of Baptism	Priest Signature
Date recorded	Add to PDS
Certificate printed, signed, sealed, mailed	