



ST. ANTHONY'S CATHOLIC CHURCH

Request for BAPTISM

CHILD'S NAME: SURNAME	GIVEN NAMES: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>
DATE OF BIRTH: MONTH/DAY/YEAR	PLACE OF BIRTH: CITY/PROVINCE/COUNTRY
NAME OF FATHER (surname/given names)	RELIGION OF FATHER BAPTISM DATE: CONFIRMATION DATE:
NAME OF MOTHER (surname/given names) MAIDEN NAME:	RELIGION OF MOTHER BAPTISM DATE: CONFIRMATION DATE:
CONTACT INFORMATION: NAME & ADDRESS	EMAIL/CELL PHONE:
CHURCH/PLACE OF WEDDING: NAME/CITY/COUNTRY	THIS IS YOUR 1 ST , 2 ND , 3 RD , 4 TH , n TH CHILD?
GODFATHER: SURNAME/GIVEN NAMES/RELIGION BAPTISM DATE: CONFIRMATION DATE:	GODMOTHER: SURNAME/GIVEN NAMES/RELIGION BAPTISM DATE: CONFIRMATION DATE:
INTERVIEW DATE WITH PASTOR:	DATE OF BAPTISM PREPARATION COURSE:
BAPTISM DATE AND TIME:	OFFICIATING PRIEST:
<p>I, the parent of this child, am practicing my Catholic faith weekly and in daily life and will raise this child in the practice of the Roman Catholic religion, especially the weekly celebration of the Eucharist, the other sacraments, the scriptures and prayer.</p> <p>I, the parent of this child, promise to support my spouse in raising this child in the practice of the Roman Catholic religion.</p>	
FATHER'S SIGNATURE: _____ Date	MOTHER'S SIGNATURE: _____ DATE

PLEASE PROVIDE A COPY OF THE CHILD'S BIRTH CERTIFICATE. The Godparent must be at least 16 years of age
At least one fully initiated Roman Catholic godparent is required. **Please provide godparent's Confirmation record.**

