

Today's Date: \_\_\_\_\_

Primary Contact Name: \_\_\_\_\_

Primary Phone No: \_\_\_\_\_ Cell? \_\_\_\_\_

Secondary Phone: \_\_\_\_\_ Cell? \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Requested Baptism Date(s): \_\_\_\_\_

Full Legal Name of Candidate: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

City/State of Birth: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Catholic: Yes \_\_\_\_\_ No \_\_\_\_\_

Mother's Full Legal Name: \_\_\_\_\_

Mother's Full Maiden Name: \_\_\_\_\_

Catholic: Yes \_\_\_\_\_ No \_\_\_\_\_

Are the child's parents married? Yes No

Were the child's parents married in the Catholic Church? Yes No

Is this your first child? Yes No

Godparent Names \_\_\_\_\_ Catholic? \_\_\_\_\_

(if unknown, leave blank) \_\_\_\_\_ Catholic? \_\_\_\_\_

*\* All godparents/witnesses must be baptized Christians*

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*For Office Use Only*

Date Received: \_\_\_\_\_ ID#: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

Letter Sent: \_\_\_\_\_ Brochure Sent: \_\_\_\_\_

Preparation Completed? Yes \_\_\_\_\_ No \_\_\_\_\_

Godparent Letter Requested: Yes \_\_\_\_\_ No \_\_\_\_\_

Received: Yes \_\_\_\_\_ No \_\_\_\_\_

Fr. \_\_\_\_\_