

SACRED HEART OF JESUS ROMAN CATHOLIC CHURCH

Baptismal Information Request Form

FULL NAME OF CHILD: _____

City of Birth: _____

Child's Date of Birth: _____ Child's Age: _____

Are parent's married ____yes ____no (If no, proof of paternity MUST be submitted in order for the child to carry the father's last name on the certificate.)

FATHER'S FULL NAME: _____

Father's religion: _____

If Catholic, does the father attend Mass regularly? ____yes ____no
~~~~~

MOTHER'S FULL MAIDEN NAME: \_\_\_\_\_

Mother's religion: \_\_\_\_\_

If Catholic, does the mother attend Mass regularly? \_\_\_\_yes \_\_\_\_no

FAMILY ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TELEPHONE NUMBERS: (home) \_\_\_\_\_

(work) \_\_\_\_\_ (cell) \_\_\_\_\_

(email): \_\_\_\_\_

(If parents are not registered at Sacred Heart of Jesus Catholic Church, or live within its territory, then we will need a letter from the pastor of the church in which you are registered or in whose territory you reside to baptize the child here.)

PARENT'S MARITAL STATUS: (CHECK ONE)

\_\_\_\_married in the Catholic Church (date & church: \_\_\_\_\_)

\_\_\_\_married civilly.

\_\_\_\_married by other minister: \_\_\_\_\_other denomination

\_\_\_\_not married (if couples are not married, proof of paternity is required for the child to carry the father's last name.)

PROSPECTIVE GODPARENT INFORMATION (Godparents MUST be practicing Catholics, baptized, confirmed, and able to receive Holy Communion.)

❖ PROSPECTIVE GODFATHER'S FULL

NAME: \_\_\_\_\_

Is he Catholic? \_\_\_\_yes \_\_\_\_no

If yes, date of birth: \_\_\_\_\_

Church of Baptism: \_\_\_\_\_

Is he 16 years or older? \_\_\_\_yes \_\_\_\_no

Is he confirmed? \_\_\_\_yes \_\_\_\_no

If, yes: church of Confirmation: \_\_\_\_\_

Date of Confirmation: \_\_\_\_\_

Is he married? \_\_\_\_yes \_\_\_\_no

If yes, date and church: \_\_\_\_\_

Does he attend Mass regularly? \_\_\_\_yes \_\_\_\_no

If yes, what Church: \_\_\_\_\_  
~~~~~

❖ PROSPECTIVE GODMOTHER'S FULL

NAME _____

Is she Catholic? ____yes ____no

If yes, date of birth: _____

Church of Baptism: _____

Is she 16 years or older? ____yes ____no

Is she confirmed? ____yes ____no

If, yes: church of Confirmation: _____

Date of Confirmation: _____

Is she married? ____yes ____no

If yes, date and church: _____

Does she attend Mass regularly? ____yes ____no

If yes, what Church: _____

OFFICE USE ONLY:

Date parent(s) attended class: _____

Baptism date: _____ Time: _____ By: _____

PROSPECTIVE GODPARENTS APPROVAL

Godfather Approved: _____ (priest approved by initialing)

Godmother Approved: _____ (priest approved by initialing)