

St. Benedict the Abbot Catholic Church
Baptismal Registration Form

****For Pastoral reasons see one of the Priests before Registration****

Date: _____

Father's Name: _____ Religion _____

Mother's Full Maiden Name _____ Religion _____

Address/ City/ State/Zip Code: _____

Telephone Numbers: (home) _____ (day time) _____

Name of Child: _____

Date of Birth: _____ City: _____ State: _____

Baptism in: English _____ Spanish _____

Are parents married in the church? _____ Do you want to get married in the church? _____

ROLE OF GODPARENTS:

- (1) A mature Christian who will establish a lifelong faith relationship and be willing to walk with the child in their faith journey.
- (2) A Christian model for the child.
- (3) A confirmed, practicing Catholic who attends Mass regularly. If married, married by the Church.
- (4) Knows, understands and participates in the Church community.

Godfather's Name: _____ Phone _____

Religion _____ Church: _____

Godmother's Name: _____ Phone _____

Religion: _____ Church: _____

If non-catholic please write name on this line (Christian Witness): _____

Name of the Church Godparents were married:

City: _____ State _____

Godparents Marriage Certificate Presented: Yes No

For Office Use Only

Interviewed By: _____ Date: _____

Note: _____

Attended Class: 1. Yes No 2. Yes No 3. Yes No

Date of Baptism: _____ Priest /Deacon: _____

Entered in Church Records by: _____ Date: _____