

Holy Family Baptism Data PLEASE PRINT

Child's Full Name _____

Gender: Male Female

City & State of Birth _____ Birth Date _____

Current Address _____ Phone _____

Father _____ Religion _____

Mother's Maiden (1st and Last) _____

Religion of Mother _____

Parents married in _____ Church. Date of Marriage: _____

Were parents married by a Catholic priest? Yes No If not, marriage blessed? Yes No Date: _____

Parents registered in _____ Parish

Date Scheduled for Baptism Class _____ Date Attended _____

Date Scheduled for Baptism _____

Please circle day and time: Saturday, 4:00 p.m. Sunday, 9:00 a.m. Sunday, 5:30 p.m.

Pews reserved? Yes No How many attending? _____

Godfather _____ Catholic: Yes/No
Proxy (name) _____

Godmother _____ Catholic: Yes/No
Proxy (name) _____

Criteria for Baptism:

1. Registered at Holy Family--or a letter from their Pastor.
2. Reasonable assurance that the child will be raised Catholic.
3. Parents attend Mass regularly and are practicing Catholics.
4. Have completed the Catechesis for Baptism and are willing to take part in other sacramental programs.
5. One Godparent must be a baptized, confirmed and practicing Catholic and the other Godparent must be a Baptized Christian
6. One man required, one woman required
7. Proxy does not have to be Catholic
8. When does the Baptism take place? After the Homily, before the Profession of Faith
9. How early to be there? 15 Minutes before Mass and seated in reserved seating

For office use:

Child was baptized by _____

Date _____