

ST. ANTHONY OF PADUA 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
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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: \_\_\_\_\_  
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❖ 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)