

# BAPTISMAL INFORMATION

Expectant Date: \_\_\_\_\_ Expectant Baptism Date: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_  
(First, Middle, Last)

Date of Birth: \_\_\_\_\_

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

Birth Place: \_\_\_\_\_

Parents' Phone: \_\_\_\_\_

## *PARENTS' INFORMATION*

**Father's Name:** \_\_\_\_\_ **Religion:** \_\_\_\_\_

**Mother's Maiden Name:** \_\_\_\_\_ **Religion:** \_\_\_\_\_

Parents' Marriage Valid?  Yes  No Where? \_\_\_\_\_

Registered Members?  Yes, When? \_\_\_\_\_  No, Where? \_\_\_\_\_

## *GODPARENTS' INFORMATION*

**Name:** \_\_\_\_\_ **Religion:** \_\_\_\_\_

Practicing Faith?  Yes  No

Church Attending:  St. Philip the Apostle  Other: \_\_\_\_\_

Place and Date of Baptism \_\_\_\_\_

Place and Date of Confirmation \_\_\_\_\_

Godparent's Marriage Valid?  Yes  No

Church of Marriage: \_\_\_\_\_

**Name:** \_\_\_\_\_ **Religion:** \_\_\_\_\_

Practicing Faith?  Yes  No

Church Attending:  St. Philip the Apostle  Other: \_\_\_\_\_

Place and Date of Baptism \_\_\_\_\_

Place and Date of Confirmation \_\_\_\_\_

Godparent's Marriage Valid?  Yes  No

Church of Marriage: \_\_\_\_\_

*Parents and sponsors must attend a baptismal instruction class prior to the baptism.  
Please check with the receptionist for the dates of these classes, 979-543-3770.*