

DATA FOR BAPTISMAL REGISTER

Before Baptism, please fill out this form.

Name of Child _____
First Middle Last

Date of Birth _____
Month Day Year

City of Birth _____

Street/City/Zip _____

_____ *Tel* _____

Father's Name _____
First Middle Last

Religion of Father _____

Mother's Maiden Name _____
First Middle Surname

Religion of Mother _____

Date of Baptism _____
Month Day Year

Godfather's Name _____ *Catholic?* _____

Godmother's Name _____ *Catholic?* _____

Name of Priest _____

Were Parents married by a Priest? _____

Is either Godparent represented by Proxy? _____

Name of Proxy(s) _____

Was the child adopted? _____

Was the child privately baptized? _____

Remarks: