

INTERNAL USE ONLY

Child's Name: _____

Register page and line: _____

Notes: _____

Suggested Donation
(check when payment rec'd)

Sunday: \$100 _____

Saturday (Private): \$150 _____
Celebrant: _____**INTERNAL USE BY PRIEST/DEACON**

Date of Baptism: _____

Presider: _____

Enrolled in Pre-Baptism Class

Date: _____

Exempt from course: _____

Baptism Information

(Please Print)

Information must match birth certificate

Child's First Name _____

 Male Female

Date of Birth _____

Middle _____

Last Name _____

City of Birth _____

State of Birth _____

Parent's Information

Father's Name _____

Sacraments received: Baptized Catholic

Middle _____

First Communion Confirmation

Last Name _____

Not Catholic

Mother's Name _____

Sacraments received: Baptized Catholic

Middle _____

First Communion Confirmation

Maiden Name _____

Not Catholic Married in the Catholic Church? Yes No

Street Address _____

City _____

State _____

Zip _____

Home Phone _____

Cell Phone _____

Email Address _____

Parish AffiliationI am a member of St. Timothy Catholic Church: Yes Envelope # _____ No**Godparent Information**

Godfather's First Name _____

Last Name _____

Godmother's First Name _____

Last Name _____

I affirm that all the information provided above is true. I am requesting the sacrament of Baptism for my child through St. Timothy Catholic Church. It is my intent to raise my child as a Roman Catholic.

Parent Signature _____

Date _____