

Information Blank

Holy Baptism

DATE OF APPLICATION _____

DESIRED DATE OF BAPTISM _____

FULL NAME _____ GENDER _____

ADDRESS _____

FATHER'S FULL NAME _____

MOTHER'S MAIDEN NAME _____

PARENTS' ADDRESS _____

PARENTS' TELEPHONE _____

RELIGIOUS AFFILIATION OF PARENTS _____

**WITNESSES
OR
SPONSORS**

1. FULL NAME _____

ADDRESS _____

2. FULL NAME _____

ADDRESS _____

3. FULL NAME _____

ADDRESS _____

DATE OF BIRTH _____

PLACE OF BIRTH _____

For Office Use

DATE OF BAPTISM _____

PLACE OF BAPTISM _____

OFFICIANT _____