

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: