

RECORD OF BAPTISM

Date of Baptism _____ Time of Baptism _____

Sacrament Administered By _____

Name of Candidate _____
First Full Middle Last

Date of Birth _____ Place of Birth _____
Month Day Year City State

Name of Father _____ Catholic ____ Non Catholic ____
First Full Middle Last

Name of Mother _____ Catholic ____ Non Catholic ____
First Full Middle Last (Maiden)

Address _____ Telephone _____ Telephone _____

Married by a Priest? _____ Married before? (Husband) _____ (Wife) _____

Was previous marriage annulled by the Catholic Church? (Yes or No) _____

Name of Godmother _____ Catholic ____ Non Catholic ____
First Middle Initial Last

Name of Godfather _____ Catholic ____ Non Catholic ____
First Middle Initial Last

Have you attended Baptism Class before (Yes or No) _____

Date attended class _____

Location of class _____

Date completed _____