# BAPTISM REGISTRATION

**Mother's Name:** _____ **Religion** _____

First Maiden Last

**Father's Name:** _____ **Religion** _____

First Last

**Address:** _____ **Phone N0.** _____

**City, State:** _____ **Zip:** _____

**Date & Place of Marriage:** _____

**If unmarried, does father request name on Baptismal Certificate? Yes** _____ **No** _____

**Names and ages of other children:** _____

_____

**Registered in Parish? Yes** ____ **No** ____ **Year of Registration** _____

**Intended Godparents:**

**Name:** _____ **Name:** _____

**Age:** _____ **Age:** _____

**Religion:** _____ **Religion:** _____

**Confirmed:** _____ **Confirmed:** _____

**Have you attended a previous Baptism program? Yes** ___ **No** ___

**Attendance at St. Peter's Classes – dates and who attended:**

_____

**If elsewhere, where and when?**

_____

**Child's Name:** _____

**Due Date or Date of Birth:** _____

**Place of Birth**: _____

**Requested Date and Time for Baptism:** _____

**Special Requests for Baptism Ceremony:**

02/04