

St. Juan Diego Parish Baptism Information Form

Date of Baptism: _____

Time: _____

Suggested Donation \$50

This information is entered in the permanent records. Print clearly. Use full names, not initials or nick names

Registered in St. Juan Diego Parish? Yes _____ No _____ Year of registration: _____

Legal name of child: _____ () ()
Male Female

Date of Birth: _____ In _____
(Month/Day/Year) (City, State, Country)

Family's Current Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email Address: _____

Father's Legal Name: _____

Is father a practicing Catholic? _____ Where? _____
Parish City State

Mother's Legal **Maiden** Name: _____

Is mother a practicing Catholic? _____ Where? _____
Parish City State

Godfather: _____

Has godfather received First Eucharist? _____ Been Confirmed? _____ Is over 16? _____

Is godfather a practicing Catholic? _____ Where? _____
Parish City State

Godmother: _____

Has godmother received First Eucharist? _____ Been Confirmed? _____ Is over 16? _____

Is godmother a practicing Catholic? _____ Where? _____
Parish City State

Witness(es): (Optional) _____

Is witness a practicing Christian? _____ Denomination: _____

Please bring completed form to the office.

Baptized on _____ At St. Juan Diego Parish Yes () No ()
(Date)

If not, where? _____

Priest/Deacon: _____ from _____

Registered in Parish Ledger: _____ Certificate sent: _____