

# BAPTISMAL INFORMATION FORM

DATE OF BAPTISM \_\_\_\_\_

MOTHER'S NAME  
(include maiden name) \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_  
\_\_\_\_\_

HOME PHONE NUMBER \_\_\_\_\_

CELL PHONE NUMBER \_\_\_\_\_

EMAIL \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_

GENDER OF CHILD       BOY             GIRL      

DATE OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

SPONSOR(S) \_\_\_\_\_