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Form for St. Francis de Sales Parish Baptism Register

Are you a registered parishioner of St. Francis de Sales Church?: _____ Yes _____ No
(If no, you must attend a Welcome Meeting and Register before you can schedule a date for your baby's Baptism.)

Name of Child: _____
First Middle Last

Residence: _____
Street City State Zip-Code

Home Phone: () _____ Cell: () _____

Child's Date of Birth: _____

Child's Place of Birth: _____
City State

Father's Name: _____
First Middle Last

Religion of Father: _____

Mother's Maiden Name: _____
First Middle Last

Religion of Mother: _____

Were parents married by a Catholic Priest? _____

Godfather's Name: _____
First Middle Last

Is the Godfather Catholic? _____

Godmother's Name: _____
First Middle Last

Is the Godmother Catholic? _____

Is either Godparent represented by Proxy? _____

If yes, Name of Proxy: _____

Preference date for Baptism: _____

Was the child privately baptized? _____

Was the child adopted? _____

For Church use:
Name of Priest: _____