

# Pre-Baptismal Inquiry

*---Office Use Only---*

**PRE-BAPTISMAL INTERVIEW**

Date: \_\_\_\_\_ Interviewer: \_\_\_\_\_

\_\_\_\_\_

**Pre-Baptismal Class**

Date: \_\_\_\_\_

Father \_\_\_\_\_

Mother \_\_\_\_\_

Godfather \_\_\_\_\_

Godmother \_\_\_\_\_

Donations/Fees Checks No. \_\_\_\_\_ Collected by: \_\_\_\_\_

\_\_\_\_\_

*-Office Use Only-*

**Requested Baptism Date:**

\_\_\_\_\_

*--Priest/Deacon Use Only--*

**BAPTISM COMPLETED**

Baptism Date: \_\_\_\_\_

Priest/Deacon Signature: \_\_\_\_\_

**PRINT Child's Full Name** \_\_\_\_\_

Date of Birth \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Was the child privately baptized? ☐ Y or ☐ N Adopted? ☐ Y or ☐ N

## The Parents of the Child

PRINT Father's Full Name \_\_\_\_\_

Mother's First and Maiden Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Cellphone Number \_\_\_\_\_

Are you registered at St. Philip the Apostle? ☐ Y or ☐ N If yes, Registration Number \_\_\_\_\_

Email address \_\_\_\_\_

If you attend Mass on Sunday, which church do you attend? \_\_\_\_\_

Why would you like to have your child baptized in the Catholic Church? \_\_\_\_\_

Why would you like to have your child baptized at St. Philip's? \_\_\_\_\_

Are both parents willing to raise the child in the Catholic tradition? \_\_\_\_\_

What does "raising the child in the faith" mean to you? \_\_\_\_\_

### Marital Status of Parents

Please check Y or N for each of the following:

We are married in the Catholic Church.

☐Y or ☐N

If No, Is there interest to be married in the Catholic Church?

☐Y or ☐N

We were married in another church.

☐Y or ☐N

We are civilly married only.

☐Y or ☐N

We are living together but not married.

☐Y or ☐N

One (both) of us had a previous marriage.

☐Y or ☐N

I am a single parent.

☐Y or ☐N

### Faith Practice of Parents

Please answer all that applies for each of the following:

Baptized Catholic or (other \_\_\_\_\_)

Mother

☐Y or ☐N

Father

☐Y or ☐N

Has made First Communion

☐Y or ☐N

☐Y or ☐N

Has received Confirmation

☐Y or ☐N

☐Y or ☐N

If No, Is there interest in First Communion/Confirmation?

☐Y or ☐N

☐Y or ☐N

Participates weekly at Mass.

☐Y or ☐N

☐Y or ☐N

Attends church, but not regularly.

☐Y or ☐N

☐Y or ☐N

Rarely goes to church.

☐Y or ☐N

☐Y or ☐N

Is a practicing member of another religion?

☐Y or ☐N

☐Y or ☐N

Does not practice any religion.

☐Y or ☐N

☐Y or ☐N

Are you interested in registering at St. Philips?

☐Y or ☐N

☐Y or ☐N

Are you interested in joining one of our small faith communities?

☐Y or ☐N

☐Y or ☐N

### Godparent Information

Name of Godfather \_\_\_\_\_

Name of Godmother \_\_\_\_\_

Please check all that apply:

**IMPORTANT: Note that at least one godparent must be a practicing Catholic**

Baptized Catholic or (other \_\_\_\_\_)

Godmother

☐Y or ☐N

Godfather

☐Y or ☐N

Has made First Communion.

☐Y or ☐N

☐Y or ☐N

Has received Confirmation.

☐Y or ☐N

☐Y or ☐N

Participates weekly at Mass

☐Y or ☐N

☐Y or ☐N

If No, Are you willing to commit to this?

☐Y or ☐N

☐Y or ☐N

Attends church but not regularly.

☐Y or ☐N

☐Y or ☐N

Is a practicing member of another religion?

☐Y or ☐N

☐Y or ☐N

Is married?

☐Y or ☐N

☐Y or ☐N

Is married in the Catholic Church?

☐Y or ☐N

☐Y or ☐N

If No, Is there interest to be married in the Catholic Church?

☐Y or ☐N

☐Y or ☐N

Are you interested in joining one of our small faith communities?

☐Y or ☐N

☐Y or ☐N

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Priest's/Deacon's Signature

\_\_\_\_\_  
Date