St. Mark Catholic Church

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Email: stmarkpsr@eatel.net

FOR OFFICE USE ONLY: Date Received	Parishioner registra	tion date	Parishioner ID#
Baptismal Information		Ant	icipated Baptismal Date
Child's full name:		Sex	Due Date:
Date of Birth:	City of Birth:		Contact Email:
Contact Phone Number:	Alternate Contact Phone Number		
Address			
Father's Name (First, Middle, Last):			
Religion:	Confirmed: <u>yes/no</u>		
Mass Attendance: Weekly [] Occasion	onally [] Seldom [] N	ever[]	
Mother's Name (First, Middle, Maio	den):		
Religion:	Confirmed: <u>yes/nc</u>	<u>)</u>	
Mass Attendance: Weekly [] Occasion	onally [] Seldom [] N	ever []	
Married? <u>yes/no</u> If married, is the Church of Marriage (include city and state			
GODPARENTS: *Godparents are required to be Confirm letter of verification is required of godpa		_	d in good standing with the Catholic Church. A
Godfather's Name (First, Middle, Las	t):		
Religion:If Ca	atholic – Confirmed an	d practicing?: ye	<u>s/no</u>
What Catholic Church are they currer	ntly registered at?		
Is Godfather married?: yes/no If	married, is Godfather	validly married ir	n the Catholic Church?: yes/no
Godmother's Name (First, Middle, M	aiden, Last):		
Religion:If Cath	olic – Confirmed and p	oracticing?: yes/r	<u>10</u>
What Catholic Church are they currer	ntly registered at?		
Is Godmother married?: yes/no If	married, is Godmothe	r validly married	in the Catholic Church?: yes/no
*A Baptismal seminar is required of both par when and where below. If other than St. Ma			ded a baptismal seminar in the last 3 years – please no
Father	Mother		
Date	Church	Date	Church
Godfather	Godmo	ther Date	 Church
Date	CHUICH	Date	CHUICH