



HOLY REDEEMER
CATHOLIC CHURCH

1603 N THACKER AVE KISSIMMEE, FL 34741
(407) 847-2500 EXT 212



Baptism Registration Form

Today's Date: _____

Name Of Child: _____
First Middle Last

Date Of Birth: ____/____/____ Sex: ☐ Male ☐ Female

Place Of Birth: _____
City State Country

Address: _____
City State Zip code

Father's Name: _____
First Middle Last

Email: _____ Phone Number: _____

Mother's Name: _____
First Middle Maiden Name

Email: _____ Phone Number: _____

Who has guardianship of child? _____

Do both parents agree to the Baptism of this child? ☐ YES ☐ NO

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

Are you a registered member of Holy Redeemer? ☐ YES ☐ NO

If the answer is NO, list in which parish you are registered and provide a permission letter from your parish.

Church Name _____ City _____ State _____ Country _____

Godfather's Full Name _____
First Middle Last

Godmother's Full Name _____
First Middle Last

(Please submit the *Godparent Eligibility Form* for **EACH** godparent)

For Office Use Only

Date Received _____ Received By _____ Birth Certificate _____ Donation _____ Parent's Parish Registration _____ Sponsor's Parish Registration _____

Godfather Form _____ Godmother Form _____ Godparent Class _____ Godparent Parish Letter _____ Parent Class _____ Parent Parish Curtesy Letter (if applicable) _____

Date of Baptism _____ Time _____ Celebrant _____ Book _____ Line# _____ Pg# _____