**INFORMATION FOR BAPTISM REGISTER**

**ST. ANN CATHOLIC CHURCH**

**DATE OF BAPTISM:\_\_\_\_\_\_\_\_\_**

** During Mass? (Circle one: Sat. 5:15 PM; Sun 8:00; or 10:30 AM)**

** After Mass? (Circle one: Sat. 5:15 PM; Sun 8:00; or 10:30 AM)**

**Other time:\_\_\_\_\_\_\_\_\_\_\_**

**IF *during* Mass, approximately how many will attend?\_\_\_\_\_\_**

**CHILD:**

|  |  |
| --- | --- |
| **Child’s FULL Name** |  |
| **Date of Birth** |  |
| **Place of Birth** |  |
| **Was the child baptized in an emergency situation?  Yes  No** |

**PARENTS:**

|  |  |
| --- | --- |
| **Father’s** *full* **Name** |  |
| **Religion of Father** |  |
| **Mother’s** *full* **Name** *(including maiden name)* |  |
| **Religion of Mother** |  |
| **Were Parents married by** **a Catholic priest?** |  |
| **Address** |  |
| **Home or cell phone #’s** |  |

**GODPARENTS:**

|  |  |
| --- | --- |
| **Godfather’s** *full* **name** |  |
| **Godfather’s religion** |  |
| **Godmother’s** *full* **name** |  |
| **Godmother’s religion** |  |

|  |
| --- |
| **Name of Priest:** |
| **If Baptism is during Mass, please list other family names that you would like to have included in the Litany of Saints:** |

**FOR OFFICE USE ONLY:**

** Entered in Record Book  Entered in the computer records**

** Certificate given to parents OR:  Certificate mailed out**