DATA FOR BAPTISMAL REGISTER

	First		Middle		Last		
Full Name of Chil	d:						
Date of Birth:	City & State of Birth:						
T					1		
	Street		City		State & Zip Code		
Address:							
Phone:	e: Email:						
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Father's Info	First	Mic	iale	Last		Religion	
Tauter Simo							
		l			ı		
	First	Mic	ldle	Last		Religion	
Mother's Info							
Are you registered Parishioners? Have you attended a Baptismal Prep Program? *Was the child baptized before? Where & when? *If the child was baptized before, you can have a beautiful ceremony in the church called the Rite of Bringing a Baptized Child to the Church, talk to the Baptismal Coordinator or one of the priests or deacons*							
Names & Ages	6						
of other sibling	s						
(Use the back of this page to tell us more about your family or any pertinent information you think would be helpful.)							
For Godparents: See the website or talk to the Baptismal Coordinator or one of the priests or deacons about qualifications, roles and responsibilities of a Godparent. We ask that they obtain a letter from their home parish/church saying they are an active member in good standing.							
	First	First Mic		Last		Religion	
Godfather's Info							
		,					
Godmother's Info	First	Mic	ldle	Last		Religion	
Proposed Date of Baptism:				Time:			
Do you have a preference on the Presider?							