



# St. John the Evangelist Baptism Preparation Class

307 E. Meigs Street Valley, NE 68064

402.359.5783 [www.stjohnvalleyne.com](http://www.stjohnvalleyne.com)

Congratulations! You are parents! You have said “yes” to God’s creative love in your lives. You have said “yes” to life. You are having or have already had a baby!

As you know, your doctor will provide medical care for mother and child, and will advise exercise, childbirth classes, a nutritious diet, and rest. He or she will also monitor the baby’s development and answer your questions and concerns.

Likewise, the Church desires to provide spiritual care for you and your baby. For your baby, this care finds its center in Baptism. Baptism is the gift of new life, the eternal life of the risen Christ. This gift is a sacrament, an encounter with Christ himself. Baptism is a moment when Christ comes to us and acts within us and among us. In this encounter, we are transformed.

Our children need our help on this spiritual journey — and the help of the entire Church — to become aware of the immense gift they have received in Baptism. Our help begins before birth and is most critical in early childhood, when the child has the greatest religious needs as well as the greatest religious capacities.

St John’s holds quarterly Baptism Classes where you will receive many tools that will help you with your child’s spiritual journey. Classes will be ninety minutes long. Once you have completed this class we can schedule your child’s Baptism.

Please call 402.359.5783 or email the office [stjohn@stjohnvalleyne.com](mailto:stjohn@stjohnvalleyne.com) to reserve your spot for the class of your choice.

This requirement is for parents and expectant parents but is encouraged for godparents too.

## Baptism Class Schedule

August 8, 2021

November 7, 2021

*All classes begin after the 10am Mass*

February 6, 2022

May 1, 2022

Child to be Baptized: \_\_\_\_\_ DOB/Due Date: \_\_\_\_\_  
*First Middle Last*

Father’s Name: \_\_\_\_\_  
*First Middle Last*

Mother’s Name: \_\_\_\_\_  
*First Middle Maiden*

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_ Are you registered at St. John’s: Yes / No  
*(If not, please contact the parish office to register)*

Godparents Name: \_\_\_\_\_ Are they Catholic: Yes / No

Godparents Name: \_\_\_\_\_ Are they Catholic: Yes / No

Will the Godparents be attending the baptism class too? \_\_\_\_\_

I/We will be attending the class on: \_\_\_\_\_ I/We hope to baptize our child on: \_\_\_\_\_

*Please return this form to the Parish Office*