

ARCHDIOCESE OF GALVESTON-HOUSTON
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Baptism Registration Form

Today's date						pleas	e print or	type
Child's 1	name							
Place of	birth	city		state				
Date of 1	birth							
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Father	first		middle		last	Religi	on	
Mother	first		middle		maiden	Religi	on	
Address	Street			City		State	Zip	
Email Addr	ess							
Daytime ph	First Choice	□cell	□home □work	and	Second Choice	□cell	□home □	_ work
Sacred Heart	t ID Number/E	nvelope Nu	mber					
How long ha	ve you been reg	istered at S	acred Heart? _					
If less than 6	months, previo	ous parish v	where registered	d:				
Does Catholi	c parent attend	Mass regul	larly?					
*****	*******	*****	*******	*********	***********	KARARA)	******	፠፠፠፠ ፠
Godparents								
Name:					_ Religion _			
Name:					_ Religion _			