BAPTISM REGISTRATION St. Paul the Apostle

Please print all information.

*A certified copy of the birth certificate must be attached.

Legal Name of Child:_					
	First	Middle		Last	
Age: (If child Faith before being Bap		rs of age or older, h	e/she must	have instructions in the Cath	
Date of Birth:	_/	/			
Place of Birth:					
		Parent Inform	nation		
Mother's Legal Name:					
C .	First	Middle	Maiden	Last	
Address:	Phone: Home				
			Cell		
Religion:					
Baptized: _		Eucharist:	Co	onfirmed:	
Registered in What Par	ish?				
If single or divorced, w	ho has le	gal custody of the c	hild?		
Complete the father's					
_				~~~~~~	
Father's Legal Name:_	First	Middle	e	Last	
Religion:					
Baptized: _		Eucharist:	Co	onfirmed:	
Are the parents married	l in the C	atholic Church?			
Yes		N		Protestant Marriage	
Name of Church	& City, S	State		_Civil Marriage _ Not Married	

Godparent Information (Only one Godfather and one Godmother)

Godparent:							
Baptized: _		Eucharist:	Confirmed:	Married:			
Godparent:	:						
Baptized: _		Eucharist:	Confirmed:	Married:			
			Office Use Only				
Date of Bap	ptism:	/	/				
Time of Baptism:							
Celebrant:							
	Parents At	tended Class					
	Birth Certi	ficate					
Godmother Registration Form							
Godmother Attended Class							
Godmother Confirmation Certificate							
Godmother Marriage Certificate (If Married)							
Godfather Registration Form							
Godfather Attended Class							
Godfather Confirmation Certificate							
	Godfather	Marriage Certifica	te (If Married)				