

**Holy Baptism - Information Form**  
(Please print)

DATE OF APPLICATION \_\_\_\_\_

FULL NAME of Child \_\_\_\_\_ SEX \_\_\_\_\_

RESIDENCE \_\_\_\_\_

FATHER'S FULL NAME \_\_\_\_\_

MOTHER'S FULL NAME \_\_\_\_\_

PARENT'S RESIDENCE \_\_\_\_\_

PARENT'S TELEPHONE \_\_\_\_\_

RELIGIOUS AFFILIATION OF PARENTS \_\_\_\_\_

1. \_\_\_\_\_

WITNESSES RESIDENCE \_\_\_\_\_

OR

SPONSORS: 2. \_\_\_\_\_

RESIDENCE \_\_\_\_\_

3. \_\_\_\_\_

RESIDENCE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

DATE OF BAPTISM \_\_\_\_\_ HOUR \_\_\_\_\_

PLACE OF BAPTISM \_\_\_\_\_

OFFICIANT \_\_\_\_\_