

# ST. CHARLES GARNIER PARISH

## BAPTISM INFORMATION

NAME OF CHILD: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_

1<sup>ST</sup> CHILD  2<sup>ND</sup> CHILD  3<sup>RD</sup> + CHILD

ADDRESS: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_ TELEPHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

NAME OF FATHER: \_\_\_\_\_

Religion: \_\_\_\_\_

NAME OF MOTHER: \_\_\_\_\_

(Maiden Name)

Religion: \_\_\_\_\_

DATE AND PLACE OF MARRIAGE: \_\_\_\_\_

MARRIED BY: \_\_\_\_\_

GODPARENTS:

\_\_\_\_\_ RELIGION: \_\_\_\_\_

\_\_\_\_\_ RELIGION: \_\_\_\_\_

DESIRED DATE OF BAPTISM: \_\_\_\_\_ @ \_\_\_\_\_ MASS (TIME)

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*For Office use only:*

BAPTISMAL PREPARATION COURSE ATTENDED:

Date: \_\_\_\_\_

Parish: \_\_\_\_\_ Signature of facilitator: \_\_\_\_\_

DATE OF BAPTISM: \_\_\_\_\_ BAPTIZED BY: \_\_\_\_\_

CHURCH: \_\_\_\_\_