

**Baptism Class Registration**  
**St. Elizabeth Ann Seton - Plano, Texas**  
972-596-5505 fax 972-985-7573

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Date of Baptism Class \_\_\_\_\_

Mother's Name \_\_\_\_\_ Catholic Yes  No

Father's Name \_\_\_\_\_ Catholic Yes  No

Address \_\_\_\_\_  
\_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone # (home) \_\_\_\_\_

(Father Cell) \_\_\_\_\_

(Mother Cell) \_\_\_\_\_

Are you a Registered Parishioner of Seton? Yes  No

If No, name of parish where you are registered \_\_\_\_\_

Is this your first Child? Yes  No

Child Care is provided for children 2 years or older

Will you need child care? Yes  No

Ages of Children for Child Care \_\_\_\_\_

Will the Baptism be at Seton? Yes  No

**For Godparents Only:**

*Need Godparent Letter?* Yes  No       *Need Class Certificate?* Yes  No

Remarks: \_\_\_\_\_

Save completed form and Print a  
copy to give to the Parish Office

**OR**

Attach SAVED form to an email and  
send to [smoran@seton.org](mailto:smoran@seton.org)