

Prep Class _____

Team Informed _____

BAPTISM REGISTRATION

Date, Time and Location of Baptism _____ **OLA*** ST. B _____

Full Name & Gender of Child :

First _____ Middle _____

Last _____ M/F _____

Residence _____

Best Telephone #: _____ Email : _____

Date **and** Place of Birth _____

Was the child adopted? _____

Was the child privately baptized? (e.g. in hospital) _____

Father's Name _____

Religion of Father _____

Mother's Name (incl. Maiden Name) _____

Religion of Mother _____

Were parents married? Y/N** _____ by a Catholic Priest? Y/N** _____

If not, by whom? _____

** If parents are not married, birth certificate is required. Received: Y/N: _____

Are parents registered at St. Brigid or Assumption in Millbury?† STB Y/N: _____ OLA Y/N: _____

† If not registered here, permission of parish pastor is needed. Received: Y/N _____

Godfather _____

Is Godfather a Confirmed Catholic? _____

Godmother _____

Is Godmother a Confirmed Catholic? _____

Is either Godparent represented by proxy? _____

Name of proxy _____

Name of Priest/Deacon _____

*NB: 2020-2021 Baptisms will be held at St. Brigid until further notice.

For Office Use:

Entered in both calendars: _____

Registered in Parish Soft (database) _____

Child and sacrament added to Parish Soft (database) _____

Called Janice G. _____

Sent email to Fr./Deacon/Team _____ Sent reminder email one week prior to Baptism date _____

Certificate saved on shared dr. _____ Entered in Official Baptism Register _____

Other notes/required documentation _____