

Request for Infant Baptism at St. Charles Borromeo Church

Child to be baptized: _____

Sex of Child: (male or female) _____ Requested Date of Baptism: _____

Date of Birth (mm/dd/yyyy): _____ Place of Birth: _____

Father's (Full) Name: _____

Mother's (Full Maiden) Name: _____

Home Address: _____

Are Mother and Father Married? _____

Is either a parishioner of SCB (either registered and/or lives within the parish boundaries)? _____

Contact Phone No: _____ Email: _____

Godfather: _____ Godmother: _____

Notes: _____

Father (signature): _____ Date: _____

Mother (signature): _____ Date: _____

Below is to be filled out by a Minister, or Parish Staff

Baptism Request Form Submitted on (date): _____

Attended Baptism Preparation Class? (Yes or No): Father: _____ Mother: _____

Class given by (name): _____ on (date): _____

Met with Priest/Deacon? (If yes): Name of clergy _____ Date _____

Birth Certificate or Verification of paternity attached? (Yes or No): _____

Donation (\$15) received? (Yes or No): _____

Baptism conferred by: _____ Date: _____

Notes: _____
