



ST. MARY'S VISITATION PARISH
 2459 146th Ave. Byron Center, MI 49315 616-681-9701
Sacristy Record of Baptism



CHILD INFORMATION:

Name of Child (first, middle, last):

Date of Birth: _____

Place of Birth: _____

Male: Female:

PARENT INFORMATION:

At least one parent must be a practicing Catholic.

Fathers Name (first, middle, last):

Date of Birth: _____

Catholic

Mother's Maiden Name (first, middle, last):

Date of Birth: _____

Catholic

Family Address:

Phone: _____

Are Parents of the Child:

Married Unmarried

Were Parents married by Catholic priest or deacon:

Yes No

Registered Members of the Parish:

Church of Attendance if not SMV

SPONSOR INFORMATION:

At least one sponsor must be a confirmed and practicing Catholic in good standing.

Godparents MUST be Catholic

1. **Sponsor Name** (first, middle, last):

Catholic

2. **Sponsor Name** (first, middle, last):

Catholic

Additional Sponsors: May be Catholic or other Christian denomination, practicing and in good standing. Other Christian sponsors are known as Christian Witnesses.

Sponsor Names (first, middle, last):

1. _____
 Catholic Other _____

2. _____
 Catholic Other _____

DATE OF BAPTISM:

Baptisms are scheduled on the 3rd Sunday of the month after the 11:00 a.m. Mass. Other times are at the discretion of the Pastor. Please give us your preferred date of Baptism.

1st Choice of date: _____

2nd Choice of date: _____

Fill out and submit this form to the parish office at address above or via email:

parishsec@smvchurch.org. You will be contacted regarding baptismal preparation and to confirm your child's baptism.