

SAINT PATRICK CATHOLIC CHURCH
THE SACRAMENT OF BAPTISM
INFANT

Congratulations on choosing to baptize your child into the Roman Catholic faith. It is a great honor for us as a parish to welcome your child. Your child's sacrament of baptism is a moment we would like you to cherish for years to come. In order to help us in achieving that goal we have a simple questionnaire we need you to complete. Within the questionnaire are some details about the process and expectations that are necessary for us to facilitate your child's baptism.

Please complete the following information for us:

BAPTISMAL REGISTER INFORMATION

(Please print clearly, we will need to transcribe some of the information)

Child's Information	
Child's Full Name	 Unknown at this time ()
Gender	Male () Female () Unknown at this time ()
Child's Date of Birth or Due Date	
Place of Birth	

Parent/Guardian Information:	
Please indicate the categories that are appropriate for your Family	
Full Mailing Address	
Best Telephone	
Best E-mail	
Father's Full Name	
Father's Religion	Catholic: ___ Confirmed? ___ Other:
Mother's Full Maiden Name	
Mother's Religion	Catholic: ___ Confirmed? ___ Other:
Guardian's Full Name	
Guardian's Religion	Catholic: ___ Confirmed? ___ Other:
Guardian's Full Name	
Guardian's Religion	Catholic: ___ Confirmed? ___ Other:
Are Parents or Guardians Married?	Yes () No ()
If so, was there a Catholic Service?	Yes () No ()
Parents or Guardians who have not had a child baptized in the Catholic faith in the past 2 years must complete the baptismal class. Godparents are highly encouraged to attend.	
Have you baptized a child in the Catholic faith within the past 2 years?	Yes () No ()

Godparents or Christian Witnesses:	
<ul style="list-style-type: none"> ✓ The child must have at least one, preferably two, godparents who are confirmed, active Catholics in good standing. If they do not attend St. Patrick Parish, their pastor must send a form affirming that they meet these criteria. ✓ A Christian witness is a baptized Christian from another church or ecclesial communion. ✓ If the godparent or Christian witness is not available you may have them represented by proxy. Any person may serve as a proxy. 	
Full Name of Male Godparent/Witness	
What will they be identified as?	Catholic Godparent () Christian Witness ()
Would you like this on the certificate?	Yes () No ()
If there is a proxy, place full name here	
Full Name of Female Godparent/Witness	
What will they be identified as?	Catholic Godparent () Christian Witness ()
Would you like this on the certificate?	Yes () No ()
If there is a proxy, place full name here	

Special Requests	
Requested date and time of baptism	
Requested alternate date and time of baptism	
Requested Priest or Deacon:	
Baptism During Mass	Yes () No () Time requested:
Would you like a certificate?	Yes () No ()
Other Requests	
Donation:	

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Baptism Class Completed	Parents Yes () No () N/A () Godmother Yes () No () N/A () Godfather Yes () No () N/A ()
Final Date and Time	
Baptism During Mass	Yes () No ()
Priest or Deacon who Performed Ceremony	
Certificate Requested	Yes () No ()
Donation	Yes () No ()
Certificate Made	Yes () No ()
Baptismal Garment Made	Yes () No ()
Family Database Updated	Yes () No ()
Recorded in Baptismal Registry	Yes () No ()
Parish Registration, if necessary	Yes () No ()

Please return this form to at Saint Patrick Catholic Church, 2111 Muldoon Road, Anchorage, AK 99504, or send by e-mail mforncelli@st.patsak.org. To learn about the baptismal classes offered please refer to the parish bulletin or call the parish office, 337-1538.