

REGISTRATION FOR BAPTISM

St. Mary's Catholic Church

Parish office: 1303 W Broadway, Winona, MN 55987 Phone: 507-452-5656

Email: stmarys@wacs1.org

Today's Date: _____

CHILD'S NAME:	_____	(M or F)
Date of Birth	_____	
Place of birth	In _____ (city)	_____ (state)

FATHER'S NAME	_____
Religion	_____
MOTHER'S NAME	_____
(include maiden name)	_____
Religion	_____
Address	_____
Telephone number	_____
Email address	_____
Were parents married by a priest?	_____
Is one of both parents registered members of the parish?	_____

GODFATHER	_____
Religion	_____
GODMOTHER	_____
Religion	_____

Siblings and ages:	_____
Have the parents completed a preparation session?	_____
Mass preferred:	___ 4:30 pm Saturday ___ 8:30 am Sunday ___ 10:30 am Sunday
Baptism preference:	___ During Mass ___ Other date and time _____
Pews to be reserved (if during Mass)	_____
Name of Priest	_____
Date/time of baptism	_____
Do you grant permission for photos of you and your family to be used in church bulletins, newsletters, bulletin boards, or websites produced by St. Mary's Parish, Cathedral or St. Casimir Parish?	_____
SIGNATURE:	_____

OFFICE CHECKLIST

Family record updated in parish database

Liturgical roles during Mass: (Family members or friends requested)

Lector Gift Bearers Servers Eucharistic Ministers

Other _____

Number of pews to reserve at Mass _____

Livestream

Bulletin (week before baptism)

Certificate/Godparent Cards

Folder in Sacristy

Registry

Not applicable at this time:

Ministering Couple _____

Phone Number _____

Initial Mailing Sent

Follow-up letter (1-2 weeks post baptism)

Follow-up visit (6-12 months post baptism)