

**HOLY TRINITY PARISH**  
**SACRAMENT OF BAPTISM**  
**PREPARATION FORM**

**Ms. Nancy Rullo, Director of Religious Education**

Phone No. 718-746-7730 Ext. 12

E-Mail: [holytrinityfaithformation@verizon.net](mailto:holytrinityfaithformation@verizon.net)

Please complete the form below and:

1. Scan (if you have the ability) and email to [holytrinityfaithformation@verizon.net](mailto:holytrinityfaithformation@verizon.net)
2. Drop off or Mail a copy to:

Holy Trinity Faith Formation  
Attention: Ms. Nancy Rullo, Director of Religious Education  
14-51 143rd St.,  
Whitestone, NY 11357

Full Name of Child \_\_\_\_\_  
*(Exactly as on your child's birth certificate)*

Date of Child's Birth \_\_\_\_\_

Father's Name \_\_\_\_\_ Catholic? (Y/N) \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_ Catholic? (Y/N) \_\_\_\_\_

Family Home Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Godparent(s) \_\_\_\_\_

\_\_\_\_\_