St. Patrick Scheduling Form for Baptism

Please fill out this information completely.

Are you a member of this Parish?  YES:    NO:* *

*If you are not a member of Saint Patrick’s Parish,
Please complete a registration form (available in the Parish Office)

Today’s Date________________     Date of Event:______________     Start Time:__________

Will there be a Mass?  YES        NO  Anticipated Number of Guests:____

Will you be decorating the Church?  YES/NO  TIME:_______

Will you have a choir for the celebration?  YES/NO

Is there anything else that we need to know?
____________________________________________________________

Before the event can be scheduled the priest/celebrant must approve your request, so that we can be
sure it is on his calendar and that you have completed the appropriate preparation.

Fr. Zack:______________________     Other Celebrant:____________________

For another priest or deacon, please note their contact information below. This other celebrant must
send his letter requesting permission and paperwork (if he is from outside our diocese) to Fr. Zack no
later than two weeks prior to the celebration.

____________________________________________________________

____________________________________________________________

____________________________________________________________
Child’s Full Name: ____________________________________________________________

Address of Child: __________________________________________________________

City: ____________________ State: ___________ Zip: ______________

Telephone: _______________

Date of Birth: _____ / ____ / _____

Place of Birth: __________________________________________________________

Father’s Full Name: _______________________________________________________

Father’s Religion: _________________________________________________________
If Catholic, have you been confirmed? YES ______ NO ____

Mother’s Maiden Name: ____________________________________________________

Mother’s Religion: _________________________________________________________
If Catholic, have you been confirmed? YES ______ NO ____

Name of Church where you were married: ____________________________________

City: ____________________ State: __________________

Godfather’s Name: ________________________________________________________

Godfather’s Religion: _____________________________________________________

Godmother’s Name: _______________________________________________________

Godmother’s Religion: ____________________________________________________

Proxy, if any: _____________________________________________________________

Date of Baptism: _____ / ____ / _____ Time: _______ | _______

Please be here no later than 15 minutes prior to the start of the celebration, so that we can start on time.

Please contact the office as soon as possible if there are any changes to this request.