

FOR OFFICE USE ONLY

Date Requested: \_\_\_\_\_

PD: \_\_\_\_\_ Date: \_\_\_\_\_

San Gabriel Mission

**Baptismal Registration Form**

Please write legibly and use only legal names

Today's Date: \_\_\_\_\_

1. NAME OF CHILD \_\_\_\_\_

First

Middle

Last

2. DATE OF BIRTH \_\_\_\_\_ CITY OF BIRTH \_\_\_\_\_

3. HOME ADDRESS \_\_\_\_\_

4. HOME TELEPHONE NUMBER ( ) \_\_\_\_\_

5. NAME OF FATHER \_\_\_\_\_

First

Middle

Last

6. NAME OF MOTHER \_\_\_\_\_

First

Middle

Last

MAIDEN NAME OF MOTHER \_\_\_\_\_

7. RELIGION OF FATHER \_\_\_\_\_

8. RELIGION OF MOTHER \_\_\_\_\_

9. ARE PARENTS MARRIED OR SINGLE? \_\_\_\_\_

IF MARRIED, ARE PARENTS MARRIED BY A CATHOLIC PRIEST? YES \_\_\_\_\_ NO \_\_\_\_\_

10. NAME OF GODMOTHER \_\_\_\_\_

First

Middle

Last

11. TELEPHONE NUMBER OF GODMOTHER ( ) \_\_\_\_\_

12. IS GODMOTHER BAPTIZED CATHOLIC? YES \_\_\_\_\_ NO \_\_\_\_\_

FIRST COMMUNION? YES \_\_\_\_\_ NO \_\_\_\_\_ CONFIRMED? YES \_\_\_\_\_ NO \_\_\_\_\_

SINGLE\_\_ MARRIED \_\_, IF MARRIED, IS SHE MARRIED BY A CATHOLIC PRIEST? \_\_\_\_\_

13. NAME OF GODFATHER \_\_\_\_\_

First

Middle

Last

14. TELEPHONE NUMBER OF GODFATHER ( ) \_\_\_\_\_

15. IS GODFATHER BAPTIZED CATHOLIC? YES \_\_\_\_\_ NO \_\_\_\_\_

FIRST COMMUNION? YES \_\_\_\_\_ NO \_\_\_\_\_ CONFIRMED? YES \_\_\_\_\_ NO \_\_\_\_\_

SINGLE\_\_ MARRIED \_\_, IF MARRIED, IS HE MARRIED BY A CATHOLIC PRIEST? \_\_\_\_\_

16. WAS THE CHILD BAPTIZED PREVIOUSLY IN AN EMERGENCY? YES \_\_\_\_\_ NO \_\_\_\_\_

I AM CURRENTLY A PRACTICING CATHOLIC YES NO

I HAVE READ THE ABOVE STATEMENTS AND DECLARED THEM TO BE TRUE.

X \_\_\_\_\_