

# St. Elizabeth – Baptismal Registration Form

**Baptismal Date** \_\_\_\_\_

**Child's Name** \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

City of Birth \_\_\_\_\_

**Father's Name** \_\_\_\_\_

**Mother's First & Maiden Name** \_\_\_\_\_

Father's Religion \_\_\_\_\_ Mother's Religion \_\_\_\_\_

Address \_\_\_\_\_

Cell Phone \_\_\_\_\_

Alternative Phone Number \_\_\_\_\_

Email: \_\_\_\_\_

Are parents married?  Yes (Church of marriage \_\_\_\_\_)  No

Are parents registered members of St. Elizabeth's?  Yes  No

If not, would you like to register?  Yes # \_\_\_\_\_  No

If not, what parish do the parents belong? \_\_\_\_\_

**Godfather** \_\_\_\_\_

Godfather's Religion \_\_\_\_\_ Is the Godfather fully initiated? \_\_\_\_\_

**Godmother** \_\_\_\_\_

Godmother's Religion \_\_\_\_\_ Is the Godmother fully initiated? \_\_\_\_\_

Notes: \_\_\_\_\_

## **FOR OFFICE USE ONLY**

Priest / Deacon \_\_\_\_\_

Baptism Preparation: Date of attendance \_\_\_\_\_

Baptism: \$100 Date received \_\_\_\_\_ cash / check # \_\_\_\_\_

Birth Certificate:  Yes  No

Date taken \_\_\_\_\_ By \_\_\_\_\_