

# ST. PETERS THE APOSTLE CATHOLIC PARISH

## Baptismal Registration Form

Name of Child: \_\_\_\_\_  
First
Middle
Last

Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

**Father's Information**

**Mother's Information**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Religion: \_\_\_\_\_

Religion: \_\_\_\_\_

**Sacraments Received**

(Circle)  
 Baptism Yes No  
 Eucharist Yes No  
 Confirmation Yes No  
 Reconciliation Yes No  
 (Penance / 1<sup>st</sup> Confession)

(Circle)  
 Baptism Yes No  
 Eucharist Yes No  
 Confirmation Yes No  
 Reconciliation Yes No  
 (Penance / 1<sup>st</sup> Confession)

**MARITAL STATUS** (Please circle one.)

Single Married Separated Divorced Widowed

If married, did the marriage take place in the Catholic Church? Yes \_\_\_ No \_\_\_

Are parents registered members of St. Peter's? Yes \_\_\_ No \_\_\_ Attend Mass regularly? Yes \_\_\_ No \_\_\_

Are parents members of a Small Faith Comm.? SFC# \_\_\_\_\_ If not, interested in Retreat? Yes \_\_\_ No \_\_\_

**Godfather's Information**

**Godmother's Information**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Religion: \_\_\_\_\_ Age: \_\_\_\_\_

Religion: \_\_\_\_\_ Age: \_\_\_\_\_

Received Sacraments of Initiation? Yes \_\_\_ No \_\_\_

Received Sacraments of Initiation? Yes \_\_\_ No \_\_\_

Married? Yes \_\_\_ No \_\_\_

Married? Yes \_\_\_ No \_\_\_

In the Church? Yes \_\_\_ No \_\_\_

In the Church? Yes \_\_\_ No \_\_\_

Active member of Church? Yes \_\_\_ No \_\_\_

Active member of Church? Yes \_\_\_ No \_\_\_

Name of parish: \_\_\_\_\_

Name of parish: \_\_\_\_\_

If outside parish, will Godparents be attending Baptism Seminar at St. Peter's? Yes \_\_\_ No \_\_\_

If not, have parents been advised of Godparent's requirement to provide "proof-of-attendance" certificate? Yes \_\_\_ No \_\_\_

Godparents represented by proxy? Godfather Yes \_\_\_ No \_\_\_ Godmother Yes \_\_\_ No \_\_\_

Was the child baptized in danger of death? Yes \_\_\_ No \_\_\_ Was the child adopted? Yes \_\_\_ No \_\_\_

**FOR OFFICIAL USE ONLY**

Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Status:

\_\_\_\_\_ Ready for Seminar

\_\_\_\_\_ Seminar not required. Reason: \_\_\_\_\_

\_\_\_\_\_ Approved for Baptism. Approved by: \_\_\_\_\_

\_\_\_\_\_ Not approved for Baptism.

Requires:

\_\_\_\_\_ Letter of Approval from Home Parish

\_\_\_\_\_ Letter of Seminar/Baptismal Instructions Completion

\_\_\_\_\_ Names and Status of Godparents

\_\_\_\_\_ Requires Interview w/priest. Interview scheduled with: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Other

Baptismal Classes: *Dates* Class 1 \_\_\_\_\_ Class 2 \_\_\_\_\_ Class 3 \_\_\_\_\_

Administrative Fee: (\$20) Yes \_\_\_\_\_ No \_\_\_\_\_

Officiating Priest: \_\_\_\_\_ Tentative date of Baptism: \_\_\_\_\_ Time: \_\_\_\_\_

**INTERVIEWER'S COMMENTS: (Date and Sign)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PRIEST COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**TELEPHONE CALLS/CONVERSATIONS RECORD:**

\_\_\_\_\_  
\_\_\_\_\_